#### UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF MISSISSIPPI EASTERN DIVISION

SCOTT E. BELL

**PLAINTIFF** 

VS.

CIVIL ACTION NO.

CITY OF COLUMBIA; COLUMBIA POLICE DEPARTMENT; CHIEF MIKE COOPER; OFFICER ADAM KELLY AND UNKNOWN DEFENDANTS ABC AND XYZ {formerly civil cause no. 18cv133AM}

**DEFENDANTS** 

# **EXHIBIT A**

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# IN THE CIRCUIT COURT OF MARION COUNTY, MISSISSIPPI

SCOTT E. BELL

PLAINTIFFS

CAUSE NO. 123 AM

CAUSE NO. 1804 135 7

CITY OF COLUMBIA; COLUMBIA
POLICE DEPARTMENT; CHIEF MIKE
COOPER; OFFICER ADAM KELLY AND
UNKNOWN DEFENDANTS ABC and XYZ
JANETTE NOLAN, CIRCUIT CLERK

COMPLAINT

#### JURY TRIAL DEMANDED

Comes now the Plaintiff, Scott E. Bell, by and through his attorney, and hereby files this his Complaint against the Defendants, City of Columbia, Columbia Police Department, Chief Mike Cooper, Officer Adam Kelly, and Unknown Defendants ABC and XYZ and would show unto the Honorable Court the following, to-wit:

#### I. PARTIES

- 1. Plaintiff Scott E. Bell is an adult resident citizens of Marion County, Mississippi, residing at 1202 Pine Court, Columbia, Mississippi, 39429.
- 2. That the Co-Defendant, City of Columbia (hereinafter "Columbia") may be served with process by serving its Clerk, Donna McKenzie, at 201 Second Street, Mississippi 39429, or in the time and manner otherwise provided by the State of Mississippi and the rules of civil procedure.
- 3. That the Co-Defendant, Columbia Police Department (hereinafter "CPD") may be served with process by serving its current Chief, Michael Kelly, at 205 Second Street, Mississippi 39429, or in the time and manner otherwise provided by the State of Mississippi and the rules of civil procedure.
  - 4. That the Co-Defendant, Chief Mike Cooper (hereinafter "Chief Cooper"), the former

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JANETTE NOLAN

CIRCUIT CLERK

Chief of the Columbia Police Department at all times relevant hereto, may be served with process by serving him at his residence or in the time and manner otherwise provided by the State of Mississippi and the rules of civil procedure.

- 5. That the Co-Defendant, Officer Adam Kelly (hereinafter "Kelly") was at all relevant times an officer with the Columbia Police Department and may be served with process by serving him at his residence or in the time and manner otherwise provided by the State of Mississippi and the rules of civil procedure.
- 6. Defendants ABC and XYZ are defendants whose identities are unknown at this time. When the identities of these anonymous defendants are known, this Complaint will be amended with their proper names.

### II. JURISDICTION AND VENUE

- 7. This Honorable Court has jurisdiction of the parties and the subject matter of this Complaint.
- 8. Venue is proper in Marion County pursuant to Mississippi Code Annotated Section 11-11-3, and pursuant to Mississippi law.
- 9. The amount in controversy herein exceeds the minimum jurisdictional limits of this Court pursuant to Mississippi Code Annotated § 9-7-81(1972).

#### III. BACKGROUND

10. On or about October 24, 2017, Mr. Bell, a fifty-one (51) year old retired veteran after twenty-seven (27) years of service with the U.S. Navy without blemish, left his parent's residence of 118 C & S Road, Kokomo, Marion County, Mississippi, for his residence of 1202 Pine Court, Columbia, Marion County, at approximately 10:15 p.m. in his 1970 Chevy C10 classic truck. Exhibit

"A". In route, he was traveling down North Park Avenue near Willow Drive within the city limits of the City of Columbia at a speed well below the speed limit and cautiously avoiding the significant potholes and related debris in an effort to avoid damage to his vehicle. Said roadway has no dividing lines and at the time there was no traffic experienced. Simultaneously, Mr. Bell saw the emergency lights flashing behind him of Officer Kelly's patrol vehicle and Mr. Bell pulled over. Mr. Bell, having experience himself as a law enforcement officer, immediately turned on his hazard lights, retrieved his license, and placed his hands upon the steering wheel.

The Officer turned on his high beams and search light as he got out of his car and approached Mr. Bell's vehicle. The Officer's first verbal contact with Mr. Bell was already in an escalated and agitated tone as he accused Mr. Bell of driving recklessly. Mr. Bell responded in explanation that he was trying to avoid the potholes that existed due to lack of proper maintenance. Mr. Bell asked the Officer if the high beams were necessary as they were reflecting off his mirrors and blinding him. The Officer, in response, slung open Mr. Bell's truck door using profanity and commanding Mr. Bell get out of his vehicle and Mr. Bell acknowledged he would comply, but that the Officer did not have to be rough with his vehicle. Mr. Bell proceeded to unbuckle the lap belt and exit his vehicle when he was struck by the Officer blind-sightedly in his left eye. Mr. Bell does not know what the Officer struck him with as he did not see the strike coming. At no time did Mr. Bell attempt to struggle or resist the officer and in no way behaved in a manner that would suggest he intended to do so.

From that point all Mr. Bell remembers is coming to and lying flat on the pavement with the Officer on top of him with his knee and taser in Mr. Bells back. Mr. Bell suffered injury to his forehead and blood was flowing from his nose and mouth believed to have been caused by his forcibly and uncontrollably coming into blunt force contact with the pavement. The left side of his face was in significant pain. The Officer threatened to taser him if he moved as the Officer called for backup. Mr.

Bell inquired of the Officer what he did to warrant this severity of treatment, but the Officer, responding with more profanity and threats of being tased, commanded he shut up. Upon other officers arriving, Officer Kelly borrowed one of their sets of handcuffs and handcuffed Mr. Bell without a struggle. Officer Kelly got off of Mr. Bell and proceeded to search Mr. Bell's vehicle as an Officer Bass helped Mr. Bell to his feet and took Mr. Bell to his patrol vehicle.

Mr. Bell informed Officer Bass that he needed to go to the hospital as he believed Officer Kelly had "broke" his face. Mr. Bell inquired what was to be done with his dog in his truck and his truck. Officer Bass said he would inquire and let him know. Officer Bass searched Mr. Bell's person and placed Mr. Bell in a patrol vehicle. Officer Bass spoke to Officer Kelly about the vehicle and dog and told Mr. Bell they would be taken care of. Officer Bass took Mr. Bell to Marion General to have the injuries looked over and blood was drawn. However, law enforcement informed medical personnel that it was not necessary that the blood be tested. Mr. Bell's wallet and phone were returned to him by the officers. After a cat-scan, Mr. Bell was given pain medication and informed by Dr. Coleman that due to multiple closed fractures in his face, that Marion General could not treat him, he needed further examination, and Mr. Bell was placed in an ambulance and transported to Forrest General where, after further examination, Mr. Bell was advised to make an appointment with a facial expert and he was subsequently discharged. Exhibit "B" Medical Records and Exhibit "C" Pictures of Injuries.

Despite Mr. Bell's family's efforts to obtain Mr. Bell's dog and truck, the dog was turned over to animal control and the truck towed. Exhibit "D" Animal Control Receipt and Exhibit "E" Tony's Small Engine Receipt.

Despite officers' request that his blood that was drawn at Marion General not be tested for alcohol and controlled substances, Mr. Bell subsequently requested same be tested for intoxicating substances considering the circumstances. Exhibit "F"

As a direct and proximate result of the Defendants' intentional, wilful, reckless, grossly negligent and negligent acts, Mr. Bell has sustained damages that include, but are not limited to physical injury resulting in past and potential future medical bills and physical, mental, and emotional pain and suffering. The injuries and pain and suffering were a direct result of the assault and application of excessive and unnecessary force applied by Officer Kelly against Mr. Bell.

#### **CAUSES OF ACTION**

- 12. The Plaintiff, Mr. Bell, had the right to be free from unreasonable search and seizure of his person and property. Defendants denied him this right, as guaranteed by the Fourth Amendment of the United States Constitution, an as applied to the States through the Fourth Amendment of the United States Constitution.
- 13. While being detained and wrongfully being taken into custody, Mr. Bell had the right to be free of cruel and unusual punishment, which includes being viciously beaten, subdued and shackled, and threatened repeatedly with the use of taser. Defendants denied him this right.
- 14. The right to be free of such is guaranteed to detainees by the Eighth Amendment and due process clause of the Fourteenth Amendment of the United States Constitution.
- 15. Mr. Bell asserts claims for violation of his rights under the Fourth, Eighth, and due process cause of the Fourteenth Amendments.
- 16. The Defendants, Columbia, CPD, and Chief Cooper, failed to properly and adequately train, supervise, and/or hire Kelly in violation of Mr. Bell's rights. They were indifferent to his background and failed to perform adequate background checks into Kelly's personal and professional background prior to hiring placing the general public in danger and Mr. Bell being a member of the general public and citizen resident of Columbia, Mississippi. These rights are

guaranteed to Mr. Bell pursuant to the Fourth and Eighth Amendment and under the due process clause of the Fourteenth Amendment.

- 17. As a direct and proximate result of the actions of the Defendants, the following clearly established and well settled federal constitutional rights of the Plaintiff, Mr. Bell, were violated, though not limited by such:
  - a. Freedom from unreasonable search and seizure;
  - b. Freedom from the use of excessive, unreasonable, and unjustified force against his person;
  - c. Freedom from cruel and unusual punishment;
  - d. Due process of law; and
  - e. Equal protection under the law.
- 18. 42 U.S.C. Section 1983 provides a remedy for the violation of the Mr. Bell's rights as described above. Mr. Bell asserts a Section 1983 claim against all Defendants for the violation of his rights while acting under the color of law under the Fourth Amendment, Eighth Amendment, and due process clause under the Fourteenth Amendment, and/or the Equal Protection Clause as stated above, and otherwise within the meaning of constitutional rights under Section 1983.
- 19. In addition, pursuant to 42 U.S.C Section 1988, when he prevails in this action,
  Plaintiff is entitled to recovery of Attorney's fees, cost, and other expenses as set forth in the statute.

  Mr. Bell asserts a claim against all Defendants for such relief.

#### **COUNT I**

## Liability of Officer Kelly, Chief Cooper, and CPD

20. The Defendant, Officer Kelly, was directly involved in the beating of Mr. Bell, as

discussed above. In addition, Officer Kelly and CPD were directly involved in the improper detainment and arrest of the Plaintiff, Mr. Bell. Such conduct was at all times with the course and scope of the officers employment by CPD and Chief Cooper and conducted or performed under the color of law.

- 21. Pursuant Section 1983, therefore, Mr. Bell asserts a claim against these Defendants, Officer Kelly, Chief Cooper, and CPD, for deprivation of his constitutional rights under the Fourth Amendment, Eighth Amendment, and due process clause of the Fourteenth Amendment, and /or Equal Protection Clause.
- 22. The Defendants have caused Mr. Bell pain, suffering, emotional distress, physical injuries, loss of enjoyment of life, non-medical expenses, and medical expenses.
- 23. Plaintiff, Mr. Bell, seeks compensatory damages against said Defendants, jointly and severally, in an amount to be determined by a trial.
- 24. Mr. Bell also seeks an award of punitive damages against said Defendants, jointly and severally, in an amount to be determined at trial.
- 25. Mr. Bell seeks an award of attorney's fees, cost, and other expenses against said Defendants, jointly and severally.
- 26. Mr. Bell seeks prejudgment interest against said Defendants, jointly and severally, for the medical expenses and all other items of damages that are "liquidated" as of the date of the filing of his Complaint.
  - 27. Mr. Bell also seeks post-judgment interest as provided by statute.

#### **COUNT II**

#### City and CPD Liability under Section 1983

- 28. Columbia, Chief Cooper, and CPD were the final policy makers and final approvers of said policy for the City of Columbia Police Department with respect to law enforcement activities. In addition, CPD is responsible for the implementation and promulgation of official policy for the Columbia Police Department.
- 29. In addition, the violent tendencies of Officer Kelly were known, or should have been known, to Columbia, CPD, and Chief Cooper prior to the events which are the subject of this lawsuit. The injuries suffered by the Plaintiff, Mr. Bell, were foreseeable and the defendants had the power and authority to alleviate them.
- 30. Further, Columbia, CPD, and Chief Cooper failed to properly train and supervise Officer Kelly thereby resulting in the violation of Mr. Bell's constitutional rights as mentioned herein.
- 31. Instead the aforementioned Defendants demonstrated a deliberate and reckless indifference to the actions of Officer Kelly and his pattern of violence and denial of constitutional rights. The Defendants were also deliberately indifferent to the need for adequate training and supervision of Officer Kelly.
- 32. As a result, pursuant to Section 1983, Mr. Bell asserts a claim against these Defendants, Columbia, CPD, and Chief Cooper, for deprivation of his constitutional rights under the Fourth Amendment, Eighth Amendment, and due process clause of the Fourteenth Amendment, and /or Equal Protection Clause.
  - 33. The Defendants have caused Mr. Bell pain, suffering, emotional distress, physical

injuries, loss of enjoyment of life, non-medical expenses, and medical expenses.

- 34. Plaintiff, Mr. Bell, seeks compensatory and punitive damages against said Defendants, jointly and severally, in an amount to be determined by a trial.
- 35. Mr. Bell seeks an award of attorney's fees, cost, and other expenses against said Defendants, jointly and severally.
- 36. Mr. Bell seeks prejudgment interest against said Defendants, jointly and severally, for the medical expenses and all other items of damages that are "liquidated" as of the date of the filing of his Complaint.
  - 37. Mr. Bell also seeks post-judgment interest as provided by statute.

#### COUNT III

#### **State Law Claims**

- 38. Plaintiff hereby incorporates by reference and realleges the foregoing allegations of Paragraphs 1 through 38 of his Complaint.
- 39. Officer Kelly intentionally caused bodily harm to Mr. Bell by using unreasonable and excessive force upon his person. In addition, Officer Kelly aroused fear in Mr. Bell by and through his conduct.
- 40. The assault and battery was accomplished without the consent and against the will of Mr. Bell.
- 41. Officer Kelly intentionally caused bodily harm to Mr. Bell when the Officer knew, or should have known, that emotional distress would likely result.
- 42. The conduct of Officer Kelly was outrageous and beyond all bounds of decency so as to be regarded as odious and utterly intolerable in a civilized community.

43. The conduct of Officer Kelly caused severe emotional distress to the Plaintiff, Mr. Bell.

- 44. Mr. Bell was improperly detained, arrested, and charged with the crimes of reckless driving, disorderly conduct failure to comply, and resisting arrest.
- 45. The entire proceeding for said charges charged and instituted against Mr. Bell lacked probable cause and were maliciously and falsely pressed with the intent to counter and cover up the inappropriate conduct of Officer Kelly as aforementioned. The charges were intentionally charged to intimidate and persuade Mr. Bell to forego the claims made herein by Mr. Bell against the Defendants. As such, the Defendants acted in a manner so as to result in an abuse of process and/or malicious prosecution.
- 46. As a direct and proximate result of the aforementioned conduct, the Defendants have caused Mr. Bell pain, suffering, emotional distress, physical injuries, loss of enjoyment of life, non-medical expenses, and medical expenses.
- 47. Plaintiff, Mr. Bell, seeks compensatory and punitive damages against said Defendants, jointly and severally, in an amount to be determined by a trial.
- 48. Mr. Bell seeks an award of attorney's fees, cost, and other expenses against said Defendants, jointly and severally.
- 49. Mr. Bell seeks prejudgment interest against said Defendants, jointly and severally, for the medical expenses and all other items of damages that are "liquidated" as of the date of the filing of his Complaint.
  - 50. Mr. Bell also seeks post-judgment interest as provided by statute.WHEREFORE, PREMISES CONSIDERED, Plaintiff prays that the Defendants herein be

duly cited to appear and answer; that upon final trial of this cause, the Plaintiff request judgment for actual damages against all said Defendants, jointly and severally, punitive damages jointly and severally against all Defendants; attorney's fees and cost of litigation in an amount to be determined by the Court against all Defendants jointly and severally; and prejudgment and post-judgment interest jointly and severally against all Defendants; and for such other and further relief, special and general, at law and in equity to which Plaintiff may show himself justly entitled.

Respectfully submitted, this the \_\_\_\_day of April, 2018.

SCOTT E. BELL

By:

Joseph L. Turney Attorney for Plaintiff

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Columbia, Ms 39429
(601)731-2098
(601)731-2099 fax
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11/14/2017

Guarantor:

Scott E Bell	
1202 Pine Court	
COLUMBIA, MS 39429	

Service Location: Marion General Hospital

Insurance Coverage on File:

Current Account Balance: 609.50

This is not a bill. This is an itemization of hospital services for:

Patient:	Hospital Account:	Admission Date:	Discharge Date:
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Payments and Adjustments

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PO BOX 261397 PLANO, TX 75026 Document 19/2018/14/19/2018/19/2018/14/19/2018/14/19/2018/14/19/2018/14/19/2018/14/19/2018/19/2018/14/19/2018/14/19/2018/14/19/2018/14/19/2018/14/19/2018/19

Keystone Medical Svcs of MS, Inc. P O BOX 677864 DALLAS, TX 75267-7864

Tax ID# 46-0513242

ER: Marion General Hospital Attending Doctor: Robert M Coleman, MD

**CHECK** PAYABLE TO:



#BWNKBCK #0061 6171 0240 0253#

SCOTTE BELL 1202 PINE CT COLUMBIA. MS 39429-2114

If any problem exists concerning the payment of this bill then contact our office to make arrangements.

Date of Service: 10/24/2017 Statement Date: 10/31/2017

- Please disregard this notice if you made payment within the past I 0 days.
- ✓ Statement reflects ER Doctor services only

Our records indicate this visit is Auto Related. Please proivde our office with Auto Insurance.

Date	Description		CI.	Patient	Insurance	Insurance	100	
of Service	Procedure	Diagnosis	Charges	Payments	Payments	Adjustment/Discount	Balance	
1 0/24/201 7 1 0/24/201 7	99285 99053	802.8 802.8	\$2,373.00 \$161.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$2,373.00 \$161.00	

Correspond	lence Sent	If your insurance information differs from below, please fill out the reverse side.		
Number of Bills	Claims Sens	Primary: AUTO INFO NEEDED	Policy: xxxxx5291	
		Secondary:	Policy:	



\$2,534.00

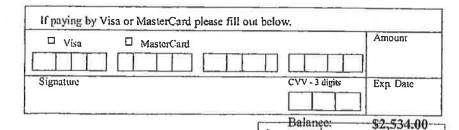
Detach and return this stub with your payment.

SCOTT E BELL 1202 PINE CT

COLUMBIA, MS 39429-2114

Check the box if the address is incorrect and indicate any changes in the space above.

Patient Name: SCOTT E BELL



Keystone Medical Sves of MS, Inc. P O BOX 677864 DALLAS, TX 75267-7864

Return address must appear in window.

Amount Paid (Cantidad de su pago.) Please show the account number on all checks and correspondence

6161710240025





®Forrest General Hospital AB051 QSFNGHWA#:49 F HATTIESBURG MS 39401-

Bell, Scott FilmRin. 20076366, DOB: 959 1966, Sex. M - Adm. 10/25/2017, D/C 10/25/2017

7243

ED Notes by Sydney Dawkins, RN at 10/25/17 0224

Author: Sydney Dawkins, RN

Service: (none)

Author Type: Registered Nurse

Filed: 10/25/17 0230

Date of Service: 10/25/17 0224

Status: Addendum

Editor. Sydney Dawkins, RN (Registered Nurse)

Related Notes: Original Note by Sydney Dawkins, RN (Registered Nurse) filed at 10/25/17 0225

Pt states that he was pulled over by the police earlier and was pulled out of the car and thrown on the ground. He thinks he was hit in the face but doesn't remember exactly what happened. Pt is awake, alert, and oriented.

Electronically signed by Sydney Dawkins, RN at 10/25/17 0230

ED Provider Notes by Michael Farmer, DO at 10/25/17 0743

Author: Michael Farmer, DO

Service: (none)

Author Type: Physician

Filed: 10/25/17 0800

Date of Service: 10/25/17 0743

Status: Signed

Editor: Michael Farmer, DO (Physician)

NAME: Scott E Bell CSN: 1032896858 MRN: 20070360

**ADMIT DATE: 10/25/2017** 

#### **EMERGENCY DEPARTMENT ENCOUNTER**

#### **CHIEF COMPLAINT**

Chief Complaint
Patient presents with

Other

Transfer from Marion for facial fx

#### HPI

Scott E Bell is a 51 y.o. male who presents to emerge from in transfer from MarionGeneral Hospital via ground unit EMS. The patient presented there after being pulled over by the police. Evidently the patient was struck in the left face by the police down in Marion County. He was hurting. They subsequently took him to the emergency room there. He was evaluated by Dr. Coleman. A CT of the facial bones was performed which showed multiple facial bone fractures. The patient was then transferred to Forrest General for further evaluation. The patient denies loss of consciousness he denies diarrhea constipation shortness of breath or chest pain. He denies any neck or jaw pain no arm pain does have a headache. He does not have abdominal pain or cramping no difficulty breathing. Incident happened last night.

# CURRENT MEDICATIONS Patient's Medications

No medications on file

**Modified Medications** 

No medications on file

**Discontinued Medications** 

No medications on file

HATTIESBURG MS 39401-

Case: 46Cl1:18-cv-00133-ANForresponrent-tostital Filed P4/14/2018 **6051 US HIGHWAY 49** 

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MRN: 20070360, DOB: 9/3/1966, Sex: M Adm. 10/25/2017, D/C 10/25/2017

7243

ED Provider Notes by Michael Farmer, DO at 10/25/17 0743 (continued)

**ALLERGIES** 

No Known Allergies

PAST MEDICAL HISTORY

Past Medical History:

· Head trauma

PTSD (post-traumatic stress disorder)

Date

10/24/2017

SURGICAL HISTORY

Past Surgical History:

Procedure

ANKLE

Laterality

Date

Right

SOCIAL HISTORY

Social History

Social History

· Marital status:

Spouse name:

 Number of children: · Years of education:

Divorced

N/A N/A

N/A

Social History Main Topics

Smoking status:

Types:

Smokeless tobacco:

· Alcohol use

Drug use:

· Sexual activity:

Former Smoker

Cigarettes

Never Used

No

No

Not Asked

Other Topics

None

Concern

Social History Narrative

None

**FAMILY HISTORY** 

History reviewed. No pertinent family history.

REVIEW OF SYSTEMS

Review of Systems

All other systems are reviewed and are negative except as above

PHYSICAL EXAM

© Forrest General Hospital Bell, Scott

Case 46 1.6-cv-00133-AM6051-US HIGHWAY 49 File MR04 A0070860, DQB, 963/1966; \$2x: M

HATTIESBURG MS 39401- Adm. 10/25/2017, D/C 10/25/2017

7243

ED Provider Notes by Michael Farmer, DO at 10/25/17 0743 (continued)

VITAL SIGNS: BP 149/95 (BP Location: Left arm) | Pulse 93 | Temp 97.5 °F (36.4 °C) (Oral) | Resp 18 | Ht 5' 8" (1.727 m) | Wt 210 lb (95.3 kg) | SpO2 99% | BMI 31.93 kg/m²

#### Physical Exam

General awake alert no distress pacing in the room GCS 15.

HEENT swelling over the left zygoma and left face. He has some mild swelling about the left and right eyelids but the people in the eye itself are seen without obstruction. His pupils are round responsive to light extra ocular intact there is no signs of muscle entrapment of the left eye. His throat is clear to posterior oropharynx is no hemotympanum no battle sign no raccoons. Does have tenderness over the left zygoma region.

Heart regular rate and rhythm no extra heart sounds noted.

Lungs clear no stridor no traction or wheeze.

Abdomen soft positive bowel sounds nondistended no guarding rebound or perineal signs nontoxic.

Extremities no cyanosis clubbing or edema.

Skin no laceration for repair he does have abrasions on the left face and zygoma region but there is nothing for me to suture. No rashes.

Neurologic 2 through 12 intact motor since function intact moves all 4 extremities without dysfunction is ambulatory no focal neurologic deficit noted

Musculoskeletal no muscle wasting.

#### **LABS**

Pertinent labs reviewed. (See chart for details)

Results for orders placed or performed during the hospital encounter of 10/24/17

CBC auto differential

obo acto differential		
Result	Value	Ref Range
WBC	14.3 (H)	4.8 - 10.8 bil/L
RBC	5.56	4.50 - 6.00 tril/L
Hemoglobin	16.8 (H)	14.0 - 16.5 g/dL
Hematocrit	48.8	42.0 - 52.0 %
MCV	88	81 - 97 fL
MCH	30	27 - 32 pg
MCHC	34	32 - 36 g/dL
RDW	14.4	11.5 - 14.5 %
Platelet Count- Automated	232	150 - 400 bil/L
MPV	8.2	7.4 - 10.4 fL
Granulocyte Relative	80.8 (H)	42.2 - 75.2 %
Lymphocytes Relative	10.0 (L)	20.5 - 51.1 %
Monocytes Relative	8.6	1.7 - 9.3 %
Eosinophils Relative	0.4	.0-<5.0 %
Basophils Relative	0.2	.0-<5.0 %
Granulocytes Absolute	11.5 (H)	1.4 - 6.5 K/UL
Lymphocyte Absolute	1.4	1.2 - 3.4 K/uL
Lymphocyte Ausulate	1.4	1.2 - 3.4 K/uL

®Forrest General Hospital POF 2051 18-cv-00133-AM51 USOHUGHWAY49

Bell, Scott FIMBNO200000380,8DOB> 9/3/1966 0\$ ex2 M HATTIESBURG MS 39401- Adm. 10/25/2017, D/C 10/25/2017

ED Provider Notes by Michael Farmer, I	DO at 10/25/17 0743 (continued)	)
Monocyte Absolute	1.20 (H)	0.11 - 0.59 K/uL
Eosinophils Absolute	0.10	0.00 - 0.70 K/UL
Basophils Absolute	0.00	0.00 - 0.20 K/UL
ANC '	11,500	K/uL
Nucleated RBCS	0 .	/100
Basic metabolic panel		
Result	Value	Ref Range
Sodium	140	135 - 145 mmol/L
Potassium	4.0	3.5 - 5.1 mmol/L
Chloride	102	98 - 107 mmol/L
CO2	22	21 - 32 mmol/L
BUN	18	7 - 18 mg/dL
Creatinine	0.73	0.60 - 1.30 mg/dL
Glucose	144 (H)	70 - 110 mg/dL
Calcium	9.1	8.5 - 10.1 mg/dL
Anion Gap	16 (H)	3 - 15 mmol/L
Osmolality Calc	284	275 - 295 mOsmol/kg
BUN/Creatinine Ratio	24.7 (H)	8.0 - 23.0 mg/dL
Non-AF American GFR	>60	>=60 m∐min
AF American GFR	>60	>=60 mL/min
PT/PTT		
Result	Value	Ref Range
Prothrombin Time	11.5-	11.0 - 15.0 seconds
INR	1.0	1.0 - 1.3
aPTT	26.3	<=40.0 seconds

#### RADIOLOGY

Ct Head Without Contrast

Result Date: 10/25/2017

This report was signed by Thomas Cole MD on 10/25/2017 7:12 AM.

Ct Facial Bones Without Contrast

Result Date: 10/25/2017

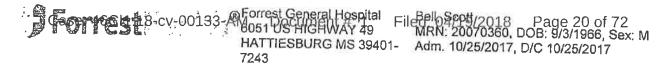
Acute fractures of the medial and lateral wall of the left maxillary sinus Acute fractures of the floor and lateral wall of the left orbit Effective Dose 2 mSv This report was signed by Juan Velez MD on 10/25/2017 12:49 AM.

#### ED COURSE & MEDICAL DECISION MAKING

Pertinent & Imaging studies reviewed. (See chart for details)

The patient was evaluated by me here in the emergency department. I reviewed the medical record from the ER visit at Marion General. He had a CT scan of the facial bones that facility which showed:

"Acute minimally displaced fracture of the left nasal bone is seen. There is deviation of the nasal septum towards the right. Acute displaced comminuted fracture of the lateral wall of the left maxillary sinus is seen. A minimally displaced acute fracture of the anterior wall of the left maxillary sinus is seen. The left zygomatic arch is fractured anteriorly and then in the midportion. The left zygomatic



ED Provider Notes by Michael Farmer, DO at 10/25/17 0743 (continued)

fracture is minimally displaced. There is an acute slightly displaced fracture of the floor of the left orbit. Nondisplaced acute fracture of the lateral wall of the left orbit is seen. The medial wall and roof of the left orbit is intact. There is opacification of the left maxillary sinus. There is extensive left preseptal soft tissue swelling which extends below the left orbit and left cheek."

There are no signs of muscle entrapment of the left eye. Patient was given a tetanus booster here in the emergency room at Forrest General.

I ordered CT scan of the head because he was complained of headache. CT the head was unremarkable for acute intracranial injury here at FGH as read by Dr. Cole from radiology. CT of the head here at Forrest General did note there were extensive facial bone fractures.

I have contacted Dr. John Sobieski is on-call for ENT maxillofacial trauma. Dr. Sobieski is asked me to have the patient follow-up with him in the office in 4-5 days. The patient be started on antibiotics from the emergency room and I will write pain medicine as well. He is to return back as needed.

ED Provider Notes by Michael Farmer, DO at 10/25/17 0743 (continued)

Discharge Instructions

Return to the ER as needed.
Follow up with your Doctor in 1-2 days.
Return for Increased temperatures.
Return for increased or prolonged symptoms that do NOT resolve or subside.

I have talked to Dr. John Sobiesk. He is an ENT Facial Plastic Surgeon. He wants you to call the office today for an appointment early next week. You will most likely need surgery to repair the fractures, but the swelling needs to settle down before that can be done.

46CIL:18-cv-00133@Marrest General Hospital 6051 US HIGHWAY 49 HATTIESBURG MS 39401-7243

Fired: 94749/2018 Page 22 of 72 MRN: 20070360, DOB: 9/3/1966, Sex: M Adm. 10/25/2017, D/C 10/25/2017

ED Provider Notes by Michael Farmer, DO at 10/25/17 0743 (continued)

**New Prescriptions** 

HYDROCODONE-ACETAMINOPHEN 5-325 every 6 (six) hours as MG PER TABLET

Take 1 tablet by mouth needed.

SULFAMETHOXAZOLE-TRIMETHOPRIM (BACTRIM DS, SEPTRA

Take 1 tablet by mouth 2 (two) times daily for 7 days.

DS) 800-160 MG PER **TABLET** 

#### FINAL IMPRESSION

Injury due to altercation, initial encounter 1.

Multiple closed fractures of facial bone, initial encounter (HCC Code) 2.

Michael Farmer, DO 10/25/17 0800

Electronically signed by Michael Farmer, DO at 10/25/17 0800

CT head	without	contrast	[102667748]

Electronically signed by Michael Farmer, DO on 10/25/17 0634

Status: Completed

Ordering user: Michael Farmer, DO 10/25/17 0634

Ordering provider: Michael Farmer, DO

Authorized by: Michael Farmer, DO

Frequency: Once specify day and time 10/25/17 0635 - 1 Occurrences Acknowledged: Sydney Dawkins, RN 10/25/17 0641 for Placing Order

Specimen Information

Type **Imaging**  Source

Collected By

Screening Form

General Information

Patient Name: Bell, Scott

MRN: 20070360

Date of Birth: 9/3/1966

Home Phone: 757-630-1906

Sex: Male

Procedure

CT HEAD WO CONTRAST

Ordering Provider Michael Farmer, DO 601-288-2100

**Authorizing Provider** 

Michael Farmer, DO

601-288**-**2100

Appointment

Information

10/25/2017 6:50 AM

FGH CT1

FGH RADIOLOGY CT

SCAN

Screening Form Questions

No questions have been answered for this form.

Printed by Gwendolyn T Robinson at 11/14/17 1:05 PM

Page 7

## Page 23 of 72 | FileBell & Page 23 of 72 | MRN: 20070360, DOB: 9/3/1966, Sex: M | HATTIESBURG MS 39401- | Adm. 10/25/2017, D/C 10/25/2017 | 7243

CT head without contrast [102667748] (continued)

Resulted: 10/25/17 0712, Result status: Final

result

CT head without contrast [102667749]

Ordering provider: Michael Farmer, DO 10/25/17 0634

Order status: Completed

Resulted by: Thomas P Cole, MD Resulting lab: FH POWERSCRIBE

Performed: 10/25/17 0656 - 10/25/17 0702

Narrative:

CT HEAD WITHOUT CONTRAST.

HISTORY: head trauma.

TECHNIQUE: CT of the head without contrast. Patient was scanned twice secondary to motion COMPARISON: No

FINDINGS: The ventricular system is normal in size and configuration. No blood products, masses, areas of edema or acute ischemic changes are identified. Extensive edema in the left face with fracture of left zygomatic arch, posterior lateral wall left maxillary sinus and left orbital floor. Fracture of left nasal bone. Visualized pterygoids and temporomandibular joints are unremarkable. Globes are intact. Mastoid air cells and calvarium are unremarkable.

#### IMPRESSION:

- 1. No acute intracranial abnormality.
- 2. Extensive left facial fractures including the left orbital floor fracture

Effective Dose 4.4 mSv

This CT examination was performed using one or more of the following dose reduction techniques: Automated exposure control, adjustment of the mA and or kv according to patient size, use of iterative reconstruction techniques.

Impression:

This report was signed by Thomas Cole MD on 10/25/2017 7:12 AM.

Specimen Information

Туре

Imaging

Source

Collected By 10/25/17 0649

**END OF REPORT** 



11/14/2017

Guarantor:

Scott E Bell	
1202 Pine Court	
COLUMBIA, MS 39429	

Service Location: Forrest General Hospital

Insurance Coverage on File: VA MEDICAL CENTER - VA MEDICAL CENTER

**Current Account Balance: 2,835.95** 

This is not a bill. This is an itemization of hospital services for:

Patient:	Hospital Account:	Admission Date:	Discharge Date:
Bell,Scott	900837947	10/25/17	10/25/17

#### Charges

ipare.	Rev.Code	Prepadne	DESCRIPTION OF STREET OF STREET	Oly	Ameun
10/25/17	0636	90714	TETANUS AND DIPHTHERIA TOXOIDS	1 1	68.95
			ADSORBED (ADULT) 5-2 LFU INJ		
10/25/17	0771	77100001	HB IMMUNIZATN SQ/IM/ID/JET, SINGLE	1 1	114.00
10/25/17	0351		HB CT-HEAD W/O CONTRAST	1 1	1.768.00
10/25/17	0450		HB ER LEVEL 4-COMPLEX	1 1	885.00
Total char	ges:				2,835.95

Total payments and adjustments:

For questions regarding this itemization, please contact Patient Financial Services Customer Service at (601)288-2032.

Forrest General Hospital 6051 US Highway 49 Hattiesburg, MS 39401-7243 Case: 46CI1:18-cv-00133-AM

Document #: 1

Filed: 04/19/2018

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FORREST

# AFTER VISIT SUMMARY

Scott E. Bell CSN: 1032896858

10/25/2017 • FGH Emergency Services 601-288-2100

## Instructions

Return to the ER as needed. Follow up with your Doctor in 1-2 days. Return for increased temperatures. Return for increased or prolonged symptoms that do NOT resolve or subside.

I have talked to Dr. John Sobiesk. He is an ENT Facial Plastic Surgeon. He wants you to call the office today for an appointment early next week. You will most likely need surgery to repair the fractures, but the swelling needs to settle down before that can be done.

# Today's Visit

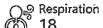
#### Diagnosis

- Injury due to altercation, initial eńcounter
- Multiple closed fractures of facial bone, initial encounter (HCC Code)
- Medications Given tetanus and diphtheria toxoids adsorbed (adult) (Td) last given at 6:48
- 🛇 Immunizations Given

#### Your End of Visit Vitals



Temperature (Oral) 97.5 °F







## Your medications have changed

START taking: HYDROcodone-acetaminophen 5-325 MG per tablet sulfamethoxazole-trimethoprim 800-160 MG per tablet (BACTRIM DS, SEPTRA DS)

Review your updated medication list below.

Pick up these medications from any pharmacy with your printed prescription

HYDROcodone-acetaminophen • sulfamethoxazoletrimethoprim



Call John D. Sobiesk, MD today Why: for an appointment next week. Specialty: Otolaryngology, Radiology Contact: 1605 S 28TH AVE

**ENT Associates** Hattiesburg MS 39402-3110 601-579-3310

**63** ForrestHealth®

Send messages to your doctor, view your test results, renew your prescriptions, schedule appointments, and more.

Go to https://iris.hattiesburgclinic.com/ iris/, click "Sign Up Now", and enter your personal activation code: WN8HR-H324F-GBHJC. Activation code expires 12/24/2017.

### Instructions (continued)



Call Joshua T. Derryberry, MD today

Why: for an appointment soon, If symptoms worsen, As needed Specialty: Family Medicine, Emergency Medicine Contact: 415 S 28TH AVE Hattiesburg Clinic PA Hattiesburg MS 39401-7246 601-579-3300

## What's Next

You currently have no upcoming appointments scheduled.

# You were seen by

You were seen by Michael Farmer, DO.

# You are allergic to the following

No active allergies

# Procedures and tests performed during your visit

CT head without contrast

# Additional Information

### RETURN TO THE EMERGENCY DEPARTMENT AS NEEDED

- See your HEALTH CARE PROVIDER or return to the ER for any increase in pain, redness, swelling, drainage in or around wound site(s); for any worsening of bleeding, pain, or any dizziness or fainting.
- Notify physician for any pain and/or temperature that is not relieved by medication.
- It is very important that you keep all appointment(s) with your health care provider.
- Wash hands for 10-15 seconds after touching raw meat, going to the bathroom, changing diapers, handling soiled
  articles, touching animals, and before preparing food.

#### LAB/X-RAY NOTICE:

If you had an x-ray taken, please note that it has been read on a preliminary basis and will be subject to final review
by the radiologist. If you had a culture done, the results are pending. You will be notified for follow-up regarding
either, if necessary.

#### IF YOU ARE A SMOKER:

- For information about how to stop smoking call: Smoke-Free Mississippi 1-800-QUITNOW (1-800-784-8669).
- Caregivers: By quitting, you protect your loved ones from illnesses caused by second hand smoke.

#### **MEDICATION INFORMATION:**

- The medications listed on this summary are based on information provided by the patient and/or the patient's
  representative. I have reviewed these medications and marked those to be discontinued.
- The patient will need to follow up with their original prescribing physician to confirm routine medications, strengths, dosages and indications.

. · · Case: 46Cl1:18-cv-00133-AM Document #: 1 Filed: 04/19/2018 Page 27 of 72

# Reminders

Do NOT take any other medications that are NOT on this list without checking with your physician.

# TAKE THESE INSTRUCTIONS TO ALL FOLLOW-UP PHYSICIAN APPOINTMENTS.

For additional health information, call your physician or search the online health information libraries located within your Iris patient portal and on the forresthealth.org website.

Case: 46CI1:18-cv-00133-AM

Document #: 1

Filed: 04/19/2018

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# Your Medication List



HYDROcodone-acetaminophen 5-325 MG per Take 1 tablet by mouth every 6 (six) hours as needed. tablet

sulfamethoxazole-trimethoprim 800-160 MG

Take 1 tablet by mouth 2 (two) times daily for 7 days.

Commonly known as: BACTRIM DS, SEPTRA DS

I fully understand the above information/instructions which have been explained to me. A copy of these instructions have been given to the patient/caregiver.

Patient Signature:	
Date:	Time:
Nurse Signature:	
Date:	Time:



Document #: 1

Filed: 04/19/2018 Page 29 of 72 MRN: 3180502, DOB: 9/3/1966, Sex: M

	8 B (92					
Patient Demograph	ilcs					
Name Bell, Scott	Patient ID 3180502	SSN xxx-xx-	-5291	Sex Male		Birth Date 09/03/66 (51 yrs)
Address 1202 Pine Court COLUMBIA MS 3	Phone 757-63 9429	0-1906 (H)	Email		Employer	
County MARION	Race White	or Caucasian	Occupation MECJ		Emp Statu Retired	s
Reg Status Verified		PCP			Date Last Verified 10/25/17	
Marital Status Divorced			Alias BELL,SCOT	TE		
Emergency Conta Stuart Bell (Father 601-736-4605 (H)	r)		Emergency ( Connie Bell ( 1202 Pine C COLUMBIA I 601-736-460	(Mother) ourt MS 39429		
Patient Ethnicity &	Race					
Ethnic Group Non-Hispanic			Patient Race White or Ca			
Medications at Star	t of Encounter					
HYDROcodone-ace Sig - Route: Take 1 Class: Print	taminophen 5-325 MG   tablet by mouth every 6	Disp per tablet 10 table (slx) hours as needed.	Refills et 0 - Oral	\$	Start 10/25/2017	End
Allergies as of 11/1	6/2017					Reviewed on: 11/3/201
No Known Allergies	Towns of the last					Nevidwed On. 11101201
Immunizations						
Name Td		Date 10/25/17				
Reason for Visit						
Facial Injury					***************************************	
Diagnoses						
Zygomatic fracture, Primary	left side, initial encoun	ter for closed fracture	(HCC Code)	Codes S02.40FA		Comments
7.1 (m. 1000) (i) 1000 (ii) 1000 (ii)						A CONTRACTOR
Vitals						
8P 139/93	Pulse 80	Ht 5' 8" (1.727 n	m)	VVI 214 lb (97		Ml 2.54 kg/m²

All Orders and Results
No orders and results found

Case: 46Cl1:18-cv-00133-AM

Document #: 1

Filed: 04/19/2018

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Bell, Scott

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

#### Flowsheet (all recorded) **Encounter Vitals** Row Name 11/03/17 1059 Enc Vitais BP 139/93 -CC 80 -00 Temp Temp src SpO2 Weight . 214 lb (97,1 kg) -CC Helght 5' 8" (1.727 m) -CC Peak Flow \_\_\_\_ Pain Score Pain Loc Pain Edu? Excl. in GC? **Custom Formula Data** Row Name 11/03/17 1059 Vitals Pct Wt Change 0 % -CC Height and Weight BMI (Calculated) 32.6 -CC BSA (Calculated -2.16 sq meters -CC sq m) Height and Weight BMI (Calculated) 32.6 -CC BSA (Calculated -2.16 sq meters -CC sq m) Weight Management BMI (Calculated) 32.61 -CC OTHER BSA (Calculated -2.16 sq meters -CC sq m) 32.6 -CC BMI (Calculated) IBW/kg (Calculated) 68.4 kg -CC Male Low Range Vt 410.4 mL -CC 6cc/kg MALE Adult Moderate 547.2 mL -CC Range VI 8cc/kg MA Adull High Range Vt 684 mL -CC 10cc/kg MALE IBW/kg (Calculated) FEMALE 63.9 kg -CC Low Range Vt 383.4 mL -CC 6cc/kg FEMALE Adult Moderate 511.2 mL -CC Range vi 8cc/kg FEMALE Adult High Range Vt 639 mL -CC 10cc/kg FEMALE BMI (Calculated) 32.6 -CC \_1.8, 3,88 -CC 2.4 5.18 -CC Percent Weight 0 -CC Change Since Birth IBW/kg 70 -CC Low Range Vt 420 mL -CC 6cc/kg

560 mL -CC

Adult Moderate



Filed: 04/19/2018 Page 31 of 72

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

### Flowsheet (all recorded) (continued)

Sustom Formula Da	ita (continuea)	
Row Name	11/03/17 1059	
		The state of the s
Adult High Range VI	700 mL -CC	The state of the s
10cc/kg		
Predicted PEF	527.58 -CC	The second secon
Tryling)	The internation of nettonic accommodations of the	
Ideal Body	154 -CC	
Weight/Lbs		
(Calculated)	20.11	· · · · · · · · · · · · · · · · · · ·
IBW/kg (Calculated) Male	68.4 kg -CC	
Anthropometrics		
_IBW/LB_(Calculated)_		the second contract of the con
Adi Body WI	166,59 -CC	Beauting as beautiful from a second of the control
%IBW	141.92 -CC	
Nutritional Requiremen	nts	
Actual BW Pds/Kg	97.07 -CC	
%IBW	138.67 -CC	The state of the s
Adjusted Body	169 -CC	
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Age	51 -CC	
BEE .	1918.84 -CC	
HVCm	172.7 -CC	
Anthropometrics		
Adj Body Wt	103.84 -CG	
Nutrition Asmt		
IBW/kg (Calculated) Female	63.9 -CC	
ser Key		(r) = Recorded By, (t) = Taken By, (c) = Cosigned By
Initials	Name	Effective Dates
CC	Crystal G Carter, LPN	03/28/11 -

Progress Notes

Author John D. Soblesk, MD Status Signed Last Editor John D. Soblesk, MD

Updated 11/3/2017 11:53 AM Created

11/3/2017 11:00 AM

Subjective:

Patient ID: Scott E Bell is a 51 y.o. male with facial fractures.

HP!

This patient was placed in the face last week. His head CT was clear. His CT of the face identified facial fractures. He was sent to the office for follow-up with me as I was on trauma call. He states he still has some numbness in his face. His teeth fit together fine. He is having no double vision. He is using a soft diet.

**Current Outpatient Prescriptions:** 

HYDROcodone-acetaminophen 5-325 MG per tablet, Take 1 tablet by mouth every 6 (six) hours as needed.

Filed: 04/19/2018 Bell, Scott

Page 32 of 72

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

Disp: 10 tablet, Rfl: 0 No Known Allergies Social History

Social History

Marital status:

Spouse name:

Number of children:

· Years of education:

Divorced

N/A

N/A

N/A

Occupational History

· Not on file.

Social History Main Topics

· Smoking status:

Types:

· Smokeless tobacco:

Alcohol use

Drug use:

Sexual activity:

Former Smoker

Cigarettes

Never Used

No

No

Not on file

Other Topics

· Not on file

Concern

Social History Narrative

· No narrative on file

Past Surgical History:

Procedure

ANKLE

Laterality

Date

Right

Patient's medications, allergies, past medical, surgical, social and family histories were reviewed and updated as appropriate.

Review of Systems

Constitutional: Negative for fever.

HENT: Positive for congestion. Negative for ear discharge, ear pain, hearing loss, nosebleeds, rhinorrhea,

sneezing, sore throat, tinnitus and voice change.

Eyes: Negative for visual disturbance. Respiratory: Negative for wheezing. Cardiovascular: Negative for palpitations.

Gastrointestinal: Negative for nausea and vomiting. Genitourinary: Negative for decreased urine volume. Musculoskeletal: Negative for myalgias (no TMJ pain).

Skin: Negative for rash:

Neurological: Negative for dizziness and seizures.

Hematological: Negative for adenopathy. Does not bruise/bleed easily.

Psychiatric/Behavioral: The patient is not hyperactive.

Objective:



File NScott Page 33 of 72 Page 33 of 72 Encounter date: 11/3/2017

Physical Exam

Vitals signs reviewed

Constitutional: pt appears well-developed and well-nourished. No distress.

Head: He has some bruising and contusion around the left eye. He has some scleral redness on the left side.

No obvious step-offs are appreciated on the infraorbital rim or ZF suture line.

Right Ear: Hearing ok, tympanic membrane intact and the middle ear space is clear, external ear and ear canal normal.

Left Ear: Hearing ok, tympanic membrane intact and the middle ear space is clear, external ear and ear canal normal.

Nose: No external deformity

inferior turbinates no significant hypertrophy

Septum no significant septal deviation

Osteomeatal complex is open left / right.

**Mouth/Throat**: Mucous membranes are normal. . No oral lesions (lips, tongue, pharynx).. No oropharyngeal exudate. Dentition is okay. His occlusion he states is fine. He still has some bruising of his left gingivobuccal sulcus

#### mirror laryngoscopy

nasopharynx not seen hypopharynx nl supraglottis nl cords poorly visualized

voice clear

Eyes: EOM are normal. Scleral redness on the left

Neck: Normal range of motion. Carotid bruit is not present. No mass and no thyromegaly present.

salivary glands

parotid

normal, soft

submandibular normal, soft

Cardiovascular: Regular rhythm

Pulmonary/Chest: Effort normal, breathing normal

Abdominal: non protuberant

Musculoskeletal: TMJ non tender to touch bilaterally

Lymphadenopathy:

no significant palpable adenopathy

Neurological: pt is alert. No cranial nerve deficit.

Skin: no head and neck lesions no eczema or rashes

Psychiatric: He has a normal mood and affect.

This patient's CT scan was reviewed. He has a minimally displaced left zygomatic malar complex fracture. He has no evidence of orbital entrapment or orbital blowout. There is no air in soft tissues and no significant blood in the sinus.

#### Assessment/Plan:

1. Zygomatic fracture, left side, initial encounter for closed fracture (HCC Code)



Files 94/19/2018 Page 34 of 72

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

This patient has a favorable fracture at this time. Displacement is minimal on the initial image

I have suggested soft diet and observation

Positioning at night with elevation of head of bed and sleeping more on the right than the left No surgery is indicated at this time. Recheck as needed

Disclaimer: This dictation was done with naturally speaking dragon dictation system and may contain unintended typographical errors created through the transciption system.

Electronically signed by John D Sobiesk, MD at 11/03/17 1153

#### NOTES

#### Patient Instructions by Crystal G Carter, LPN at 11/03/17 1040

Version 2 of 2

Author: Crystal G Carter, LPN

Service: (none)

Author Type: Licensed Nurse

Filed: 11/03/17 1153

Encounter Date: 11/3/2017

Status: Addendum

Editor: John D Sobiesk, MD (Physician)

Related Notes: Original Note by Crystal G Carter, LPN (Licensed Nurse) filed at 11/03/17 1101

Your blood pressure reading fell within the "pre-hypertension" category. Your blood pressure should be rechecked within 1 year. Steps you can take to lower your blood pressure are diet and exercise. Your diet should be low in saturated and trans fat, cholesterol, and total fat. It should be rich in fruits, vegetables, and low-fat dairy foods. Choose fewer servings of red meat, sweets, and drinks that contain sugar. Cut back on the amount of salt in your diet.

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Positioning at night with elevation of head of bed and sleeping more on the right than the left No surgery is indicated at this time. Recheck as needed

#### Patient Instructions by Crystal G Carter, LPN at 11/03/17 1040

Version 1 of 2

Author: Crystal G Carter, LPN Filed: 11/03/17 1101

Service: (none)

Encounter Date: 11/3/2017

Author Type: Licensed Nurse

Status: Signed

Editor: Crystal G Carter, LPN (Licensed Nurse)

Related Notes: Addendum by John D Sobiesk, MD (Physician) filed at 11/03/17 1153

Your blood pressure reading fell within the "pre-hypertension" category. Your blood pressure should be rechecked within 1 year. Steps you can take to lower your blood pressure are diet and exercise. Your diet should be low in saturated and trans fat, cholesterol, and total fat. It should be rich in fruits, vegetables, and low-fat dairy foods. Choose fewer servings of red meat, sweets, and drinks that contain sugar. Cut back on the amount of salt in your diet.

#### Progress Notes by John D Sobiesk, MD at 11/03/17 1040

Version 1 of 1

Author: John D Sobiesk, MD

Editor: John D Sobiesk, MD (Physician)

Filed: 11/03/17 1153

Service: (none)

Encounter Date: 11/3/2017

Author Type: Physician

er Date: 11/3/2017 Status: Signed

Subjective:

Patient ID: Scott E Bell is a 51 y.o. male with facial fractures.

**HPI** 



Files 104/19/2018 Page 35 of 72

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

#### NOTES (continued)

Progress Notes by John D Sobiesk, MD at 11/03/17 1040 (continued)

Version 1 of 1

This patient was placed in the face last week. His head CT was clear. His CT of the face identified facial fractures. He was sent to the office for follow-up with me as I was on trauma call. He states he still has some numbness in his face. His teeth fit together fine. He is having no double vision. He is using a soft diet.

**Current Outpatient Prescriptions:** 

· HYDROcodone-acetaminophen 5-325 MG per tablet, Take 1 tablet by mouth every 6 (six) hours as needed.

Disp: 10 tablet, Rfl: 0 No Known Allergies Social History

Social History

Marital status:

Divorced

Spouse name:

N/A

Number of children

N/A

Years of education:

N/A

Occupational History

· Not on file.

Social History Main Topics

Smoking status:

Former Smoker

Types:

Cigarettes Never Used

Smokeless tobacco:

No

· Alcohol use

No

· Drug use: Sexual activity:

Not on file

Other Topics

· Not on file

Social History Narrative

· No narrative on file

Past Surgical History:

Procedure

Laterality

Concern

Date

ANKLE

Right

Patient's medications, allergies, past medical, surgical, social and family histories were reviewed and updated as appropriate.

Review of Systems

Constitutional: Negative for fever.

HENT: Positive for congestion. Negative for ear discharge, ear pain, hearing loss, nosebleeds, rhinorrhea,

sneezing, sore throat, tinnitus and voice change.

Eyes: Negative for visual disturbance. Respiratory: Negative for wheezing. Cardiovascular: Negative for palpitations.



Filedi, 94/19/2018 Page 36 of 72

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

#### **NOTES** (continued)

Progress Notes by John D Sobiesk, MD at 11/03/17 1040 (continued)

Version 1 of 1

Gastrointestinal: Negative for nausea and vomiting.
Genitourinary: Negative for decreased urine volume.
Musculoskeletal: Negative for myalgias (no TMJ pain).

Skin: Negative for rash.

Neurological: Negative for dizziness and seizures.

Hematological: Negative for adenopathy. Does not bruise/bleed easily.

Psychiatric/Behavioral: The patient is not hyperactive.

#### Objective:

Physical Exam

Vitals signs reviewed

Constitutional: pt appears well-developed and well-nourished. No distress.

Head: He has some bruising and contusion around the left eye. He has some scleral redness on the left side.

No obvious step-offs are appreciated on the infraorbital rim or ZF suture line.

Right Ear: Hearing ok , tympanic membrane intact and the middle ear space is clear, external ear and ear

canal normal

Left Ear: Hearing ok, tympanic membrane intact and the middle ear space is clear, external ear and ear canal

normal.

Nose: No external deformity

inferior turbinates no significant hypertrophy

Septum no significant septal deviation

Osteomeatal complex is open left / right.

Mouth/Throat: Mucous membranes are normal. . No oral lesions (lips, tongue, pharynx).. No oropharyngeal exudate. Dentition is okay. His occlusion he states is fine. He still has some bruising of his left gingivobuccal sulcus

#### mirror laryngoscopy

nasopharynx not seen

hypopharynx nl

supraglottis nl

cords poorly visualized

voice clear

Eyes: EOM are normal. Scleral redness on the left

Neck: Normal range of motion. Carotid bruit is not present. No mass and no thyromegaly present.

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parotid

normal, soft

submandibular normal, soft

Cardiovascular: Regular rhythm

Pulmonary/Chest: Effort normal, breathing normal

Abdominal: non protuberant

Musculoskeletal: TMJ non tender to touch bilaterally

Lymphadenopathy:

no significant palpable adenopathy

Neurological: pt is alert. No cranial nerve deficit.

Skin: no head and neck lesions no eczema or rashes

Psychiatric: He has a normal mood and affect.



Files | 04/4-9/2018 Page 37 of 72 MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

NOTES (continued)

Progress Notes by John D Sobiesk, MD at 11/03/17 1040 (continued)

Version 1 of 1

This patient's CT scan was reviewed. He has a minimally displaced left zygomatic malar complex fracture. He has no evidence of orbital entrapment or orbital blowout. There is no air in soft tissues and no significant blood in the sinus.

#### Assessment/Plan:

 Zygomatic fracture, left side, initial encounter for closed fracture (HCC Code)

This patient has a favorable fracture at this time. Displacement is minimal on the initial image

I have suggested soft diet and observation

Positioning at night with elevation of head of bed and sleeping more on the right than the left No surgery is indicated at this time. Recheck as needed

Disclaimer: This dictation was done with naturally speaking dragon dictation system and may contain unintended typographical errors created through the transciption system.

Disposition

Return for Follow up with PCP for Blood Pressure Recheck.

**Encounter Messages** 

No messages in this encounter

No questionnaires available.

Encounter-Level Documents - 11/03/2017:

Document on 11/3/2017 1153 by John D Sobiesk, MD ; After Visit Summary (below)



Filed: 04/19/2018

Page 38 of 72

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

Encounter-Level Documents - 11/03/2017: (continued)

# AFTER VISIT SUMMARY La CLINIC 415 South 28th Ave., Hattlestung, MS 39401

Scott E. Bell DoB: 9/3/1966

11/3/2017 10:40 AM Q Ear, Nose & Throat 601-579-3310



#### Instructions from John D Sobiesk, MD

Your blood pressure reading fell within the "pre-hypertension" category. Your blood pressure should be rechecked within 1 year. Steps you can take to lower your blood pressure are diet and exercise. Your diet should be low in saturated and trans fat, cholesterol, and total fat. It should be rich in fruits, vegetables, and low-fat dairy foods. Choose fewer servings of red meat, sweets, and drinks that contain sugar. Cut back on the amount of salt in your diet.

This patient has a favorable fracture at this time. Displacement is minimal on the initial image

I have suggested soft diet and observation Positioning at night with elevation of head of bed and sleeping more on the right than the left No surgery is indicated at this time. Recheck as needed

Return for Follow up with PCP for Blood Pressure

#### What's Next

You currently have no upcoming appointments scheduled.

Thank you for choosing Hattiesburg Clinic for your health care needs. We are glad to serve you and happy to provide you with this summary of your visit with John D. Sobiesk, MD, Please help us ensure we have accurate records; if you find something incorrect please let our staff know.

If your provider has ordered a referral to another department or has ordered a procedure that requires scheduling, you should receive a phone call from Hattiesburg Clinic within 3 business days to schedule the service at a time that is convenient for you. If you have not received a call within 3 business days to schedule this, please contact your provider listed at the top of this document.

Allergies
No Known Allergies

### Today's Visit

You saw John D Sobiesk, MD on Friday November 3, 2017 for: Facial Injury. The following issue was addressed: Zygomatic fracture, left side, initial encounter for closed fracture (HCC Code).

Glood Pressure 139/93 О вмі ⊕ 32.54

Weight 214 lb

Height 5' 8"

Pulse 80

## Iris Sign-Up

Send messages to your doctor, view your test results, renew your prescriptions, schedule appointments, and more.

Go to https://iris.hattlesburgclinic.com/ iris/, click "Sign Up Now", and enter your personal activation code: WN8HR-H324F-GBHJC. Activation code expires 12/24/2017.

Scott E. Bell (MRN, 3180502) • Printed by [1944] at \$1/3/17 11:53 AM

Page 1 of 4 **Epic** 



Filed; Q4/19/2018

Page 39 of 72

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

Encounter-Level Documents - 11/03/2017: (continued)

Patient PCP Information

None on File

△Please follow-up with your PCP to schedule an appointment for your current health reminders

PROSTATE CANCER YEARLY SCREENING INFLUENZA VACCINE ADULT TETANUS VACCINE (2)

Due 09/03/2016 08/01/2017 10/25/2027

HBC Iris Information

November 3, 2017

Scott E Bell 1202 Pine Court Columbia MS 39429

Dear Mr. Bell:

Thank you for enrolling in Iris. Please follow the instructions below to securely access your online medical record. Iris allows you to send messages to your doctor, view your test results, renew your prescriptions, schedule appointments, and more.

#### How Do I Sign Up?

- 1. In your Internet browser, go to http://iris.hattiesburgclinic.com
- Click on the "Sign Up Now" link below the Sign-In box and you will be taken to the new member activation page.
- Enter your Ins Access Code exactly as it appears below. You will not need to use this code after you have completed the sign-up process. If you do not sign up before the expiration date, you must request a new code.

Iris Access Code: WN8HR-H324F-G8HJC Expires: 12/24/2017 12:54 AM

- Enter the last four digits of your Social Security Number (xxxx) and Date of Birth (mm/dd/yyyy) as Indicated and click Next. You will be taken to the next sign-up page.
- Create a Iris ID. This will be your Iris login ID and cannot be changed, so think of one that is secure and easy to remember.
- 6. Create a Iris password. You can change your password at any time.
- Enter your Password Reset Question and Answer and click Next. This can be used at a later time if you forget your password.

Scott E. Ball (MRN: 3180502) • Printed by (1944) at 11/3/17 13:53 AM

Page 2 of 4 Epic



Filed: 04/19/2018 Bell, Scott

Page 40 of 72

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

Encounter-Level Documents - 11/03/2017: (continued)

- 8. Select your communication preference, and if applicable enter your e-mail address. You will receive e-mail notification when new information is available in Iris by choosing to receive e-mail notifications and filling in your e-mail.
- 9. Click Sign In. You can now view your medical record.

#### Additional Information

If you have questions, you can email iris.him@hattiesburgclinic.com or call 601-579-5432 to talk to our Iris staff. Remember, Iris is NOT to be used for urgent needs. For medical emergencies, dial 911.

Sincerely,

John D. Sobiesk, MD Ear, Nose & Throat 1605 South 28th Avenue Hattlesburg MS 39401 Phone: 601-579-3310 Fax: 601-264-0231

#### Patient Instructions for Elevated Blood Pressure

Your blood pressure was found to be elevated today in the 'pre-hypertension' range, and you need to have it reevaluated by a medical provider according to what you were instructed in your visit today.

#### Patient Instructions for BMI

Your BMI is outside of the healthy range according to the CDC Your BMI is outside of the normal healthy range of 18 - 25 for patients between the ages of 18-64.

Maintaining a BMI in the normal range is just one part of staying well. Please review information on DASH eating plan, exercise and healthy BMI from the following sources:

https://www.nhlbi.nih.gov/health/health-topics/topics/obe

https://www.nhlbi.nih.gov/health/health-topics/topics/obeDiet.plan

Page 3 of 4 Epic

Case: 46CI1:18-cv-00133-AM

Document #: 1

Filed: 04/19/2018

Page 41 of 72



Bell, Scott

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

Encounter-Level Documents - 11/03/2017: (continued)

Your Medication List as of 11/3/17 11:53 AM

Always use your most recent med list.

HYDROcodone-acetaminophen 5-325 MG per tablet

Take 1 tablet by mouth every 6 (six) hours as needed.



Filed: 04/19/2018 Bell, Scott

Page 42 of 72

MRN: 3180502, DOB: 9/3/1966, Sex: M

Encounter date: 11/3/2017

Encounter-Level Documents - 11/03/2017: (continued)

**Order-Level Documents:** 

There are no order-level documents.

No results for this visit

Discharge Instructions

None

Bell, Scott (MR # 3180502)

**END OF REPORT** 

Case: 46Cl1:18 cv-00133-AM Document #-1 Filed: 04/19/2018 Page 43 of 72

Report Settings

Account: Patient:

BELL,SCOTT E [462439]

BELL,SCOTT [3180502]

Hattiesburg Clinic, P.A.

intiesburg Clinic, P.A.

Submission Information

User:

[ 9146]

Time:

Thu Nov 16, 2017 11:37 AM

•	Transaction Information				
			Service Date From	Service Date To	Total Amount
تعمة	Charges		10/25/2017	11/16/2017	216.00
Гх #	Procedure	Diagnoses	Service Provider	Date	Amount
6	99204-PR OFFICE OU	S02.40FA-Zygomatic fr	John D Sobiesk, MD [972]	11/03/2017	216.00
	(Match Pmt) 7	2000-INSURANCE PAYMENT (INS	SURANCE)	11/14/2017	122.16
	(Match Ad)) 8	3000-CONTRACTUAL WRITE-OF	F (INSURANCE)	11/14/2017	63.30
Pa	yments		Matched to cha	arges	122.16
Ad	ljustments		Matched to cha	ardes	63.30

Note: This report contains only those payments and adjustments which are matched to the charges listed in the Charges section.



11/14/2017

Guarantor:

Scott E Bell	
1202 Pine Court	
COLUMBIA, MS 39429	

Service Location: Forrest General Hospital

Insurance Coverage on File:VA MEDICAL CENTER - VA MEDICAL CENTER

Current Account Balance: 2,835.95

This is not a bill. This is an itemization of hospital services for:

	Patient:	Hospital Account:	Admission Date:	Discharge Date:
l	Bell,Scott	900837947	10/25/17	10/25/17

#### Charges

Page	Revi <b>er</b> on	a Flore alling	e Design phonography and the state of the st	a con-	≱∈Aπioυnt
10/25/17	0636	90714	TETANUS AND DIPHTHERIA TOXOIDS		68.95
	7000	1 55777	ADSORBED (ADULT) 5-2 LFU INJ	'	00.95
10/25/17	0771	77100001	HB IMMUNIZATN SQ/IM/ID/JET,SINGLE	1 1	114.00
10/25/17	0351	35110001	HB CT-HEAD W/O CONTRAST	1 1	1,768,00
10/25/17	0450	45030174	HB ER LEVEL 4-COMPLEX	1 ,	885.00
Total char	ges:		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		2,835.95

Total payments and adjustments:

For questions regarding this itemization, please contact Patient Financial Services Customer Service at (601)288-2032.

Forrest General Hospital 6051 US Highway 49 Hattiesburg, MS 39401-7243

Doc STATEMENT Filed: 04/19/2018 Case: 46CI1:18-cv-00133-AM Page 45 of 72

# Visit our Website: www.patientnotebook.com/CRS

Thank you for allowing our radiologists to be a part of your care! You may also receive an additional bill from the hospital for their portion of these services.

#### SUMMARY OF CHARGES

DUE DÂTE 11/26/17	LAST PAYMENT DATE	PADEAT	Taccount	7.11	STATEMENTIO
DATE	01/01/0001	SCOTT E BELL	248133		956864271
AND REAL PROPERTY.	CODE D	SCRIPTION OF SERVICE		State of the state	AMQUNT
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7. 3.					
**					
LATEMENT DATE		SERVICE LOCATION	T PONTACTION OF THE PARTY OF TH	and the second	
11/05/2017		EST GENERAL HOSPITAL	PRIMAHY INSURANC VA VISN 16 FEE UN	the party of the second of the last of the	ONDARY INSURANCE
r Billing Questi	ions: 866-494-826	0	IR EASE PA	Varilis AMOU	\$209.00
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💌 Update Y nu Address

Update v. ur Personal Information

· Register For Electronic Statements

Various Patient Forms

Ask A Question

DE FACH HERE AND BETURN THIS BOTTOM PORTION WITH YOUR PAYMENT USING THE BETURN ENVELOPE ENCLOSED

Comprehensive Rad Services 5000 W Fourth St Hattiesburg, MS 39402-1000

FORWARDING SERVICE REQUESTED

Still have a Question?

wate your neurance

Letur. - Payment Plan

Please have your insurance card rendy and call 866-494-8260

122267 - 262

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SCOTT E BELL 1202 PINE CT COLUMBIA MS 39429-2114



122267-262-8885490

MAKE CHECK PAYABLE AND REMIT TO:

Comprehensive Rad Services 5000 W 4TH ST HATTIESBURG MS 39402-1000 laffiladallhaaldadllhalhaffadlahaall! Case 2:18-cv-00102-MTP

Document 1-2

Filed 06/08/18

Page 47 of 83

PO Box 3488 Dept# 05-105

Dept# 05-105 Tupel (1985: 3886) 1548 cv-00133-AM

OFFICE PHONE NUMBER: 1-601-268-5734

Document #:

Lawrence Filed: 04/19/2018 F

Page made edit a soct accumity coch regul from (asea, exe) on back of camp

10/27/17 \$60.00 462439

CHARGES AND CREDITS MADE AFTER STATEMENT DATE WILL APPEAR ON NEXT STATEMENT.

SHOW AMOUNT \$

MAKE CHECKS PAYABLE / REMIT TO:

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126171-3569

907170

Scott E Bell 1202 PINE CT

ACCOUNT NAME: Scott E Bell STATEMENT #: 4934117

PLLS-PSPPE ZM AIBMUJOS

71-3569

HATTIESBURG CLINIC, PA PO Box 3488

Dept# 05-105

Tupelo, MS. 38803-3488

իմնեսեների բանակաների հետևաների հետևաների և

] Please check box if above address is incorrect or insurance information has changed, and indicate change(s) on reverse side.

000004624390000493411700000060002

Account Name	Account #	Statement Da	ite S	Statement #		Balance	
Scott E Bell		62439 10/27/17		4934117		\$60.00	
•	n	Provider	Charges	Insurance Activity	Patient	Patient Responsible	
85610 PROTHROMBIN TIM	ΛE	Leigh A Strong, MD	15.00		- Additional of the second	Kesponsibile	
85730 THROMBOPLAS TI	ME PARTIAL	Leigh A Strong, MD	15.00			15.00	
80048 BASIC METABOLIC CALCIUM TOTAL	PANEL	Leigh A Strong, MD	15.00			15.00	
	AUTO DIFF WBC	Leigh A Strong, MD	15.00			15.00 15.00	
	Descriptio  Patient: SCOTT BELL 85610 PROTHROMBIN TIM PATIENT RESPONSIBLE 85730 THROMBOPLAS TIF PATIENT RESPONSIBLE 80048 BASIC METABOLIC CALCIUM TOTAL PATIENT RESPONSIBLE 85025 COMPLETE CBC &	Description  Patient: SCOTT BELL 85610 PROTHROMBIN TIME PATIENT RESPONSIBLE 85730 THROMBOPLAS TIME PARTIAL PATIENT RESPONSIBLE 80048 BASIC METABOLIC PANEL CALCIUM TOTAL PATIENT RESPONSIBLE 85025 COMPLETE CBC & AUTO DIFF WBC	Patient: SCOTT BELL 85610 PROTHROMBIN TIME PATIENT RESPONSIBLE 85730 THROMBOPLAS TIME PARTIAL PATIENT RESPONSIBLE 80048 BASIC METABOLIC PANEL CALCIUM TOTAL PATIENT RESPONSIBLE 85025 COMPLETE CBC & AUTO DIFF WBC Leigh A Strong, MD	Patient: SCOTT BELL 85610 PROTHROMBIN TIME PATIENT RESPONSIBLE 85730 THROMBOPLAS TIME PARTIAL PATIENT RESPONSIBLE 80048 BASIC METABOLIC PANEL CALCIUM TOTAL PATIENT RESPONSIBLE 85025 COMPLETE CBC & AUTO DIFF WBC Leigh A Strong, MD 15.00	Patient: SCOTT BELL 85610 PROTHROMBIN TIME Leigh A Strong, MD 15.00 PATIENT RESPONSIBLE 85730 THROMBOPLAS TIME PARTIAL Leigh A Strong, MD 15.00 PATIENT RESPONSIBLE 80048 BASIC METABOLIC PANEL Leigh A Strong, MD 15.00 CALCIUM TOTAL PATIENT RESPONSIBLE 85025 COMPLETE CBC & AUTO DIFF WBC Leigh A Strong, MD 15.00	Patient: SCOTT BELL 85610 PROTHROMBIN TIME Leigh A Strong, MD 15.00 PATIENT RESPONSIBLE 85730 THROMBOPLAS TIME PARTIAL Leigh A Strong, MD 15.00 PATIENT RESPONSIBLE 80048 BASIC METABOLIC PANEL Leigh A Strong, MD 15.00 CALCIUM TOTAL PATIENT RESPONSIBLE 85025 COMPLETE CBC & AUTO DIFF WBC Leigh A Strong, MD 15.00	

0 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	120+ Days	Balance
\$60.00	\$0.00	\$0.00	\$0,00	\$0.00	\$60.0

ALL PATIENT RESPONSIBLE BALANCES ARE DUE UPON RECEIPT OF STATEMENT. PROMPT PAYMENT IS APPRECIATED.



Case 2	:18-cv-00102-M	TP Document	1-2 File	d 06/08/18	Page 48 o	f 83	
SOUTH MISSISSIF PO BOX 3488 DEPT# TUPELO, MS 38803-3	<b>UFMRG PHYB (PA</b> 33.		CARD VISA EHCICES FILE CARD NUMBER	MEO4/19	ОматенФидОӨ. 4	2 topoyed	AMEX AMEX
1:00 PN	Fri 8:00 AM - Noon If to 5:00 PM, P.S.T. RIES CALL: (844) 30		SHM A SERVICE FEE Y	CCOUNT: NUMBER: 32896858 VILL BE CHARGED FOR APPLIED FOR AMOUNT D	.1/19/2018 ANY CHECK RETURNE	*PACCOL	INT:BALANCE 1.00
		oon until 1:00 PM, P.S.T.		Pay at ww	w.erstatemen	t.com	
EGN1226A AUTO AI 7000016818 04.0014  IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	1.0244 16818/1 	յսոլիլ ( <sub>1</sub> ր	li S P	Inn[]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]		lbadajili -	
	DRESS OR INSURANCE CHANGE(S) ON REVERSE SID IT PAYMENT The due date, the provider rese	rves the right to seek all availab	EMENT: Pa	DDD 3289L85  Inverted for less than full be currentation of dispute to 0.000 and sources to expe	palance shall not constit Director of Compliance, F		
HENT ACCOUNT NO.	· · · · · · · · · · · · · · · · · · ·	****	TNAME	Markey (1)	AX ID NO.	DATE OF	LAST PAYME

N **EXAM** DATE RP PS DIAGNOSIS CHARGE SERVICE DESCRIPTION CODE CODE AMOUNT 23 10/25/17 99285 **EMERGENCY PHYSICIAN SERVICE** S02.82XA \$931.00

IMPORTANT NOTICE - THIS IS THE ONLY ITEMIZED STATEMENT OF SERVICES YOU WILL RECEIVE, PLEASE RESPOND NOW Your account must be paid in full within 90 days of the date of this statement unless minimum payments of \$50.00 are made by the due date or it will become delinquent. Any balance remaining on a delinquent account will automatically be assigned to a collection agency. Partial payments less than \$50.00 will not extend the delinquency date of your account.

To pay online go to www.erstatement.com - Your password is: 7C976C0C16 IF YOU HAVE INSURANCE PLEASE PROVIDE US YOUR POLICY INFORMATION SO A CLAIM MAY BE FILED WITH YOUR INSURANCE COMPANY. OTHERWISE PAYMENT IS DUE UPON RECEIPT.

CURRENT MONTH	OVER 1 MONTH	OVER 2 MONTHS	MINIMUM \$50.00 PAYMENT OR AMOUNT DUE	
\$0.00	\$931.00	\$0.00	DUE DATE:1/19/2018	- ACCOUNT BALANCE
RP 1 - FARI RENDERING 2 - PROVIDERS 3 -	MER, MICHAEL, DO	PS PLACE SERVI		\$931.00
4		FOR	REST GENERAL HOSPITA	PAGE 1 OF 1

SOUTH MISSISSIPI EMRG PHYS PA

PRIMARY INS: VETERANS ADMINISTRATION

FOR BILLING INQUIRIES CALL: (844) 301-0806

FOR BILLING INQUIRIES CALL: (844) 301-0806

1:00 PM to 5:00 PM, P.S.T.

THIS DOCUMENT CONTAINS PROTECTED HEALTH CARE INFORMATION AND IS SUBJECT TO PRIVACY REGULATIONS PURSUANT TO THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996. IF YOU ARE NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS INFORMATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL DOCUMENT TO US AT THE ADDRESS LISTED BELOW, VIA U.S. POSTAL SERVICE. THANK YOU FOR YOUR CALIFORNIA, 91086-1295. CALIFORNIA, 91066-1295.

OFFICE HOURS: Mon - Fri 8:00 AM - Noon

#### Case 2:18-cv-00102-MTP

Document 1-2

Filed 06/08/18

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PO Box 17889

HattiesbuggeM\$60494178889-00133-AM

Document #:

RETURN SERVICE REQUESTED

Billing Inquiries: (601) 264-2221 or (800) 352-7494 To Pay Online Visit: www.aaaambulance.net

CARO NUMEER

FILED: 04/19/2018 Page 48 of 72

SIGNATURE

LILIST INCLUDE 3 DIGIT SECURITY CODE FROM BACK OF CAND.

STATEMENT DATE PAYTHIS AMOUNT ACCOUNT NO. 324
11/21/2017 \$265.48 17-63652

Charges and credits made after statement date will appear on next statement, SHOW AMOUNT \$

Stmt ID#: 969489523

 $\{\{\{i,j\}\},\{j\}\},\{\{i\}\},\{\{i\}\},\{\{j\}\},\{\{$ 



COUNDIA MS 39429-2114

 Date Of Service
 Description of Charge
 Qty.
 Unit Price
 Amount

 10/25/2017
 A0429
 BLS Emergency
 1
 765.00
 785.00

 10/25/2017
 A0425
 BLS Mileage
 29.5
 18.00
 531.00

**Amount** Description of Payment Receipt **Payment Date** Tricare South Regions 5128601306 11/10/2017 136'.67 5128601306 11/10/2017 209.76 Tricare South Regions Tricare South Regions 5128601306 11/10/2017 704.09

Patient Name: Due Date: SCOTT BELL 12/01/2017

Please Pay This Amount

Over 30 Days: 0.00 Over 60 Days: 0.00 Over 90 Days: 0.00 Over 120 Days: 0.00 Total Gross Charges: 1,316.00 **Total Other Credits:** 704.09 Total Contractual Allowances: .00 Total Payments: 346.43

97960-259



0051 10/25/2017 6:09 PM

FSA RX 0445157 FSA FX 0445158

APPROVED FSA/HRA ANEURIT

THANK YOU FOR SHOPPING AT NALGREEMS

Case: 46Cl1:18-cv-00133-AM Document #: 1 Filed: 04/19/2018 Page 50 of 72





Case: 46Cl1:18-cv-00133-AM Document #: 1 Filed: 04/19/2018 Page 52 of 72



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# CITY OF COLUMBIA PD ANIMAL CONTROL

Page 53 of 72

Filed: 04/19/2018

Case: 46CI1:18-cv-00133-AM Document #: 1

CASH RECEIPT

6131

Sell	Rd	State: MS Zp: 39479	The state of the s	Time:	30-4005	STON	741	
Received of: CONNIE POUL	Address: 118 C & S Rd	oly: Columbia	Driver's License No.:	Date: 10/25/14	Telephone No. (LOC) 32,6-4405	For R.TO. 1		

Amount Paid: \$ 50°0.

Cash 🔯

Check Check

(

Purchaser's Signalure: Connes.

Animal Control Employee Sig.:

" P ...

175100 0 To the Sould Read to the to the total the Line of the Date 10-34-201 116 SOUTH HIGHSCHOOL AVE. COLUMBIA, MS 39429 Account Forward #CEL 1208121689 9569-141-109 Chary Touck Hater Leg # little, 70.70 \$ 2 1021/301/2014 1 452-4523 14.03 I

Document #: 1 Case: 46CI1:18-cv-00133-AM

Case 2:18-cv-00102-MTP Document 1-2 Filed 06/08/18 Page 56 of 83 Den, Scoπ E (MK # 200/0360)

Page 55 of 72 Document #: 1 Filed: 04/19/2018 Case: 46CI1:18-cv-00133-AM

Results

Drug screen, basic, serum (Order 102667758)

Order Information

Order Date/Time

Release Date/Time

Start Date/Time

End Date/Time

10/27/17 1446

10/27/17 1446

1 occurrence

10/27/17 1445

10/27/17 1445

**Order Details** 

Frequency **ONCE** 

Duration

Priority STAT

Order Class Unit Collect

Order Comment

Run with blood drawn 10/25/17

Encounter

View Encounter

**Reprint Requisition** 

Drug screen, basic, serum (Order #102667758) on 10/27/17

**Printing Report** 

Report ID

Report Name

Print

2105090030

HBC QUEST LABEL REPRINT

Print

**Collection Information** 

Specimen ID: 17R-300R0044

Blood

Collected: 10/25/2017 1:09 AM

Resulting Agency: FGH QUEST

ROWELL, BRANDON

19225 Newbrook Drive

Received: 10/31/2017 2:06 AM

Chantilly VA 20153-0841

Order Provider Info

Office

phone

Ordering User

David Albritton, RN

**Authorizing Provider** 

Robert Coleman, MD

601-740-

2153

View Smartlink Info

Drug screen, basic, serum (Order #102667758) on 10/27/17

**Order History** 

User

Inpatient

Date/Time **Action Taken** 

Additional Information

10/27/17 1446 Release

David Albritton, RN

From Order, 102667756

(auto-released)

Final

11/05/17 0753 Result

Fgh, Incoming Lab **Results From Quest** 

Electronically Signed By: Robert Coleman, MD

NPI #: 1225079759

Case 2:18-cv-00102-MTP Document 1-2

FOFTest 1560 SUMRALL RD

Case: 46CI1:18-cv-00133-AQLUMBIAMS-384291

Filed 06/08/18 Page 58 of 83

MRN: 20070360

Filed: 04/109209/3/1966 Sext Mof 72 Adm. 10/24/2017, D/C 10/25/2017

ED Provider Notes by Robert Coleman, MD at 10/24/17 2357

Author: Robert Coleman, MD Filed: 10/25/17 0115

Service: Emergency Medicine

Date of Service: 10/24/17 2357

Author Type: Physician

Status: Signed

Editor: Robert Coleman, MD (Physician)

NAME: Scott E Bell CSN: 1032896670 MRN: 20070360

**ADMIT DATE: 10/24/2017** 

**EMERGENCY DEPARTMENT ENCOUNTER** 

#### CHIEF COMPLAINT

Chief Complaint
Patient presents with

Facial Pain

Upper Left face/Jaw Paintrauma 30 minutes ago during an incident with the police

HPI

Scott E Bell is a 51 y.o. male who presents after being allegedly assaulted by a police officer. The patient was struck in the left side of the face with a fist he thinks. He had no loss conscious but immediate swelling and pain in the left periorbital region. He presents now for further evaluation of the area. The patient states he has no other medical problems. He does not take medications daily. He has been unable to open his eye to evaluate his vision.

#### **CURRENT MEDICATIONS**

**Patient's Medications** 

No medications on file

**ALLERGIES** 

No Known Allergies

PAST MEDICAL HISTORY

Past Medical History:

Head trauma

PTSD (post-traumatic stress disorder)

Date

10/24/2017

SURGICAL HISTORY

Past Surgical History:

Procedure

ANKLE

Laterality

Date

Right

SOCIAL HISTORY
Social History

occiai motory

Social History

Marital status:

Divorced

Spouse name:

N/A

Document 1-2 Filed 06/08/18 Page 59 of 83

1560 SUMRALL RD

MRN: 20070360

Case: 46CI1:18-cv-00133-AM COBJUBIA 48 49429 Filed: 04/19/2018 9/3/1966 SEXDM72 Adm. 10/24/2017, D/C 10/25/2017

ED Provider Notes by Robert Coleman, MD at 10/24/17 2357 (continued)

· Number of children:

N/A

Years of education:

N/A

Social History Main Topics

Smoking status;

Types: Smokeless tobacco:

Cigarettes

Never Used

Former Smoker

Alcohol use

No

Drug use:

No

· Sexual activity:

Not Asked

Other Topics

None

Concern

Social History Narrative

None

#### **FAMILY HISTORY**

History reviewed. No pertinent family history.

#### **REVIEW OF SYSTEMS**

Constitutional: No fever, chills, or weakness.

Eyes: No redness, pain, or discharge. No vision changes.

HENT: No ear pain, no headache, no rhinorrhea, no throat pain.

Respiratory: No wheezing, cough, or shortness of breath.

Cardiovascular: No chest pain, palpitations or edema. GI: No abdominal pain, nausea, vomiting, or diarrhea.

GU: No dysuria, no hematuria, or discharge.

Musculoskeletal: No pain, full range of motion. Good sensation.

Skin: No rash or abrasions.

Neurologic: No focal weakness or sensory changes.

All Systems otherwise negative except as noted in the Review of Systems and History of Present Illness.

#### PHYSICAL EXAM

VITAL SIGNS: BP 176/97 (BP Location: Right arm) | Pulse 100 | Temp 97.7 °F (36.5 °C) (Oral) | Resp 20 | Ht 5' 8" (1.727 m) | Wt 220 lb (99.8 kg) | SpO2 98% | BMI 33.45 kg/m²

Constitutional: Well developed, Well nourished, Alert & oriented x 3, No acute distress, Non-toxic appearance.

HENT: Normocephalic, swollen ecchymotic left face with periorbital ecchymosis and edema of the lower greater than upper lid. Bilateral external ears normal, Oropharynx moist, No oral exudates, External nose negative

Eyes: The right eye demonstrates normal range of motion. Left eye cannot be clearly visualized. The patient can see light and dark...

Neck: Normal range of motion, No tenderness, Supple, no carotid bruits.

Respiratory: Normal breath sounds, No respiratory distress, No wheezing, no rhonchi, no rales.

Cardiovascular: Normal heart rate, Normal rhythm, No murmurs, No rubs, No gallops.

GI: Bowel sounds normal, Soft, No tenderness, Nondistended, No masses, No pulsatile masses.

Musculoskeletal: Intact distal pulses. No edema, No tenderness, No cyanosis, No clubbing. Good range of motion in all major joints. No tenderness to palpation or major deformities noted.

Filed 06/08/18 Page 60 of 83

MRN: 20070360

Filed: 04/1002016/1966 Sex Mof 72 Adm. 10/24/2017, D/C 10/25/2017

ED Provider Notes by Robert Coleman, MD at 10/24/17 2357 (continued)

Integument: Warm, Dry, No erythema, No rash.

Neurologic: Normal motor function, Normal sensory function, No focal deficits noted.

Psychiatric: Affect normal, Judgment normal, Mood normal.

#### LABS

Pertinent labs reviewed. (See chart for details) No results found for this visit on 10/24/17.

#### RADIOLOGY

Ct Facial Bones Without Contrast

Result Date: 10/25/2017

CT OF THE FACIAL BONES WITHOUT CONTRAST History: Facial trauma injury Comparison: None This CT examination was performed using one or more of the following dose reduction techniques: Automated exposure control, adjustment of the mA and or ky according to patient size, use of iterative reconstruction techniques. Technique: Noncontrast CT axial images of the facial bones were obtained with coronal and sagittal reformatted images performed. Findings: Acute minimally displaced fracture of the left nasal bone is seen. There is deviation of the nasal septum towards the right. Acute displaced comminuted fracture of the lateral wall of the left maxillary sinus is seen. A minimally displaced acute fracture of the anterior wall of the left maxillary sinus is seen. The left zygomatic arch is fractured anteriorly and then in the midportion. The left zygomatic fracture is minimally displaced. There is an acute slightly displaced fracture of the floor of the left orbit. Nondisplaced acute fracture of the lateral wall of the left orbit is seen. The medial wall and roof of the left orbit is intact. There is opacification of the left maxillary sinus. There is extensive left preseptal soft tissue swelling which extends below the left orbit and left cheek.

Acute fractures of the medial and lateral wall of the left maxillary sinus Acute fractures of the floor and lateral wall of the left orbit Effective Dose 2 mSv This report was signed by Juan Velez MD on 10/25/2017 12:49 AM.

#### **PROCEDURES**

Procedures

#### **ED COURSE & MEDICAL DECISION MAKING**

#### **ED** Course

The patient will be transferred to Dr. Pernes service at Forrest General Hospital.

#### Medication Administration from 10/24/2017 2332 to 10/25/2017 0114

	at 15 1522		U .	Rout	5000			Com	me
¥	.Date/Time	Order	Dose	e .	Action	Action by	×* ii *	nts	
,	10/25/2017 0008	ketorolac (TORADOL) injection 60 mg	60 mg	Intra musc ular	Given	Brandon F RN	łowell,		

Pertinent & Imaging studies reviewed. (See chart for details)

There are no discharge medications for this patient.

Case 2:18-cv-00102-MTP Document 1-2 Filed 06/08/18 Page 61 of 83

T1560 SUMRALL RD

MRN: 20070360

Case: 46CI1:18-cv-00133-AM CODUMBIA:445 #9429 Filed: 04/19/2000B: 9/3Plage; 60x0M72

Adm. 10/24/2017, D/C 10/25/2017

ED Provider Notes by Robert Coleman, MD at 10/24/17 2357 (continued)

New Prescriptions

No medications on file

Discharge Instructions

None

Blood Pressure Follow-Up Advised

Patient advised to follow up with PCP within 3-5 days for blood pressure re-check if blood pressure is equal to or greater than 120/80.

#### FINAL IMPRESSION

Multiple closed fractures of facial bone, initial encounter (HCC Code)

Robert Coleman, MD 10/25/17 0115

Electronically signed by Robert Coleman, MD at 10/25/17 0115

CBC auto differential [102667742]

Awaiting signature from: Robert Coleman, MD

Mode: Ordering in Verbal with readback mode

Ordering user: Brandon Rowell, RN Authorized by: Robert Coleman, MD

Frequency: STAT Once 10/25/17 0125 - 1 Occurrences

CBC auto differential [102667745] (Abnormal)

Acknowledged: Brandon Rowell, RN 10/25/17 0125 for Placing Order

Specimen Information

Type

Source

Collected By

Blood

Communicated by: Brandon Rowell, RN

Ordering provider: Robert Coleman, MD

Resulted: 10/25/17 0223, Result status: Final result

Ordering provider: Robert Coleman, MD 10/25/17 0125

Order status: Completed

Resulting lab: MGH CC LAB Specimen Information

Type

Blood

Source Central/Peripheral Line Collected By

Brandon Rowell, RN 10/25/17 0109

Components

Component WBC

Value 14.3

Reference Range

4.8 - 10.8 bil/L

Flag H

0.25.5

Lab **MGHCC** 

Printed by Norma Dexter at 10/26/17 11:47 AM

Page 4

Status: Completed

#### Page 62 of 83 Case 2:18-cv-00102-MTP Document 1-2 Filed 06/08/18

FORTESTHEALTH 1560 SUMRALL RD Case: 46CI1:18-cv-00133-AMPLUMBIAMS 394291

MRN: 20070360 Filed: 04/19/2019/8/1986/6/8/1/2017 D/C 10/25/2017

Communicated by: Brandon Rowell, RN

Ordering provider: Robert Coleman, MD

Order status: Completed

Collected By

21 - 32 mmol/L

The state of the s			Agm. Tu/	24/2017, D/C 10/25/2017
RBC	5.56	4.50 - 6.00 tril/L	-	MGHCC
Hemoglobin	16.8	14.0 - 16.5 g/dL	Н	MGHCC
Hematocrit	48.8	42.0 - 52.0 %		MGHCC
MCV	88	81 - 97 fL	-	MGHCC
MCH	30	27 - 32 pg		MGHCC
MCHC	34	32 - 36 g/dL		MGHCC
RDW	14.4	11.5 - 14.5 %	_	MGHCC
Platelet Count- Automated	232	150 - 400 bil/L		MGHCC
MPV	8.2	7.4 - 10.4 fL		MGHCC
Granulocyte Relative	80.8	42.2 - 75.2 %	H	MGHCC
Lymphocytes Relative	10.0	20.5 - 51.1 %	L	MGHCC
Monocytes Relative	8.6	1.7 - 9.3 %		MGHCC
Eosinophils Relative	0.4	.0-<5.0 %		MGHCC
Basophils Relative	0.2	.0-<5.0 %		MGHCC
Granulocytes Absolute	11.5	1.4 ~ 6.5 K/UL	Н	MGHCC
Lymphocyte Absolute	1.4	1.2 - 3.4 K/uL		MGHCC
Monocyte Absolute	1.20	0.11 - 0.59 K/uL	Н	MGHCC
Eosinophils Absolute	0.10	0.00 - 0.70 K/UL		MGHCC
Basophils Absolute	0.00	0.00 - 0.20 K/UL		MGHCC
ANC	11,500	K/uL		MGHCC
Nucleated RBCS	0	/100		MGHCC

Basic metabolic panel [102667743]

Awaiting signature from: Robert Coleman, MD

Mode: Ordering in Verbal with readback mode

Ordering user: Brandon Rowell, RN Authorized by: Robert Coleman, MD

Frequency: STAT Once 10/25/17 0126 - 1 Occurrences

Acknowledged: Brandon Rowell, RN 10/25/17 0125 for Placing Order

Ordering provider: Robert Coleman, MD 10/25/17 0125

Specimen Information

Type Collected By Source Blood

Resulted: 10/25/17 0212, Result status: Final Basic metabolic panel [102667746] (Abnormal)

Resulting lab: MGH CC LAB

Narrative:

Туре

CO2

eGFR/eGFRaa is not calculated for individuals under the age of 18 years old or

22

Source

over the age of 90.

Specimen Information

Central/Peripheral Line	Brandon Rowell, RN 10/25/17 0109			
		ę		
Value 140	Reference Range 135 - 145 mmol/L	Flag —	Lab MGHCC	-
4.0	3.5 - 5.1 mmol/L	_	MGHCC	
102	98 - 107 mmol/L		MGHCC	
	Value 140 4.0	Reference Value Range 140 135 - 145 mmol/L 4.0 3.5 - 5.1 mmol/L	Reference Value Range Flag 140 135 - 145 — mmol/L 4.0 3.5 - 5.1 mmol/L	Reference  Value Range Flag Lab  140 135 - 145 — MGHCC  mmol/L  4.0 3.5 - 5.1 mmol/L — MGHCC

MGHCC

result

Status: Completed

#### Case 2:18-cv-00102-MTP Document 1-2 Filed 06/08/18 Page 63 of 83

Jorrest 20 17 1560 SUMRALL RD Case: 46CI1:18-cv-00133-AMCOLUMBIA MR 39429

MRN: 20070360 Filed: 04/19/201889/3/P966e56ex:df 72

Adm. 10/24/2017, D/C 10/25/2017 BUN 18 7 - 18 mg/dL MGHCC Creatinine 0.73 0.60 - 1.30MGHCC mg/dL Glucose 144 70 - 110 mg/dL H MGHCC Calcium 9.1 8.5 - 10.1 mg/dL MGHCC Anion Gap 16 3 - 15 mmol/L H MGHCC Osmolality Calc 284 275 - 295 MGHCC mOsmol/kg **BUN/Creatinine Ratio** 24.7 8.0 - 23.0 mg/dL H MGHCC Non-AF American GFR >60 >=60 ml\_/min MGHCC AF American GFR >60 >=60 mL/min MGHCC

Mode: Ordering in \ Ordering user: Brar	ert Coleman, MD	Status: Completed Communicated by: Brandon Rowell, RN Ordering provider: Robert Coleman, MD
Frequency: STAT C	Once 10/25/17 0126 - 1 Occurrenc ndon Rowell, RN 10/25/17 0125 fo ation	res or Placing Order
Frequency: STAT C Acknowledged: Bra	ndon Rowell, RN 10/25/17 0125 fo	r Placing Order  Collected By

PT/PTT [102667747] (Normal) result Ordering provider: Robert Coleman, MD 10/25/17 0125 Order status: Completed Resulting lab: MGH CC LAB Specimen Information Туре. Source Collected By Blood Central/Peripheral Line Brandon Rowell, RN 10/25/17 0109 Components Reference Component Value Range Flag Lab Prothrombin Time 11.5 11.0 - 15.0 MGHCC seconds INR 1.0 1.0 - 1.3MGHCC aPTT <=40.0 seconds 26.3 MGHCC

CT facial bones without contrast [102667739] Electronically signed by: Robert Coleman, MD on 10/24/17 2359 Status: Completed Ordering user: Robert Coleman, MD Ordering provider: Robert Coleman, MD Authorized by: Robert Coleman, MD Frequency: Once specify day and time 10/25/17 - 1 Occurrences Acknowledged: Brandon Rowell, RN 10/25/17 0005 for Placing Order Specimen Information Type Source Collected By **Imaging** Screening Form General Information

Case 2:18-cv-00102-MTP Document 1-2

@Marion General Hospital
1560 SUMRALL RD
Case: 46CII:18-cv-00133-co1umBiacms189429: 1

Filed 06/08/18 Page 64 of 83

Bell, Scott E MRN: 20070360

Filed: 04/13/96/39/1966, 3929; (4) of 72 Adm. 10/24/2017, D/C 10/25/2017

CT facial bones without contrast [102667739] (continued)

Patient Name: Bell, Scott E Date of Birth: 9/3/1966

Sex: Male

MRN: 20070360

Home Phone: 757-630-1906

Procedure

CT FACIAL BONES WITHOUT CONTRAST Ordering Provider Robert Coleman, MD 601-740-2153 Authorizing Provider Robert Coleman, MD 601-740-2153

Order status: Completed

Performed: 10/25/17 0021 - 10/25/17 0033

Appointment Information 10/25/2017 12:25 AM

MGH CC CT

MGH CC RADIOLOGY

result

Screening Form Questions

No questions have been answered for this form.

Resulted: 10/25/17 0049, Result status: Final

CT facial bones without contrast [102667741]

Ordering provider: Robert Coleman, MD 10/24/17 2359

Resulted by: Juan A Velez, MD Resulting lab: FH POWERSCRIBE

Narrative:

CT OF THE FACIAL BONES WITHOUT CONTRAST

History: Facial trauma injury

Comparison: None

This CT examination was performed using one or more of the following dose reduction techniques: Automated exposure control, adjustment of the mA and or kv according to patient size, use of iterative reconstruction techniques.

Technique: Noncontrast CT axial images of the facial bones were obtained with coronal and sagittal reformatted images performed.

Findings: Acute minimally displaced fracture of the left nasal bone is seen. There is deviation of the nasal septum towards the right. Acute displaced comminuted fracture of the lateral wall of the left maxillary sinus is seen. A minimally displaced acute fracture of the anterior wall of the left maxillary sinus is seen. The left zygomatic arch is fractured anteriorly and then in the midportion. The left zygomatic fracture is minimally displaced. There is an acute slightly displaced fracture of the floor of the left orbit. Nondisplaced acute fracture of the lateral wall of the left orbit is seen. The medial wall and roof of the left orbit is intact. There is opacification of the left maxillary sinus. There is extensive left preseptal soft tissue swelling which extends below the left orbit and left cheek.

Impression:

Acute fractures of the medial and lateral wall of the left maxillary sinus

Acute fractures of the floor and lateral wall of the left orbit

Effective Dose 2 mSv

This report was signed by Juan Velez MD on 10/25/2017 12:49 AM.

Printed by Norma Dexter at 10/26/17 11:47 AM

Page 7

Case 2:18-cv-00102-MTP Document 1-2 Filed 06/08/18 Page 65 of 83

Jorresthealth 1560 SUMRALL RD Case: 46Cl1:18-cv-00133-AMPOLEMELANES:39429

MRN: 20070360 Filed: 04/19/2013:89/3/1966 694 Wf 72 Adm. 10/24/2017, D/C 10/25/2017

Specimen Information

Type Imaging Source

Collected By 10/25/17 0038

CT head without contrast [102667748]

Electronically signed by: Michael Farmer, DO on 10/25/17 0634

Status: Completed

Ordering user: Michael Farmer, DO

Ordering provider: Michael Farmer, DO

Authorized by: Michael Farmer, DO

Frequency: Once specify day and time 10/25/17 0635 - 1 Occurrences Acknowledged: Sydney Dawkins, RN 10/25/17 0641 for Placing Order

Specimen Information

Type

Source

Collected By

**Imaging** 

Screening Form

General Information

Patient Name: Bell, Scott E Date of Birth: 9/3/1966

Sex: Male

MRN: 20070360

Home Phone: 757-630-1906

Procedure CT HEAD WO CONTRAST

Ordering Provider Michael Farmer, DO 601-288-2100

Authorizing Provider Michael Farmer, DO 601-288-2100

Order status: Completed

Performed: 10/25/17 0656 - 10/25/17 0702

Appointment Information

10/25/2017 6:50 AM

FGH CT1

FGH RADIOLOGY CT

SCAN

Screening Form Questions

No questions have been answered for this form.

Resulted: 10/25/17 0712, Result status: Final

result

CT head without contrast [102667749]

Ordering provider: Michael Farmer, DO 10/25/17 0634

Resulted by: Thomas P Cole, MD

Resulting lab: FH POWERSCRIBE

Narrative:

CT HEAD WITHOUT CONTRAST.

HISTORY: head trauma.

TECHNIQUE: CT of the head without contrast. Patient was scanned twice secondary to motion COMPARISON: No

FINDINGS: The ventricular system is normal in size and configuration. No blood products, masses, areas of edema or acute ischemic changes are identified. Extensive edema in the left face with fracture of left zygomatic arch, posterior lateral wall left maxillary sinus and left orbital floor. Fracture of left nasal bone. Visualized pterygoids and temporomandibular joints are unremarkable. Globes are intact. Mastoid air cells and calvarium are unremarkable.

#### **IMPRESSION:**

1. No acute intracranial abnormality.

Forrestile 11 6051 US HIGHWAY 49

MRN: 20070360

Case: 46Cl1:18-cv-00133-AMTIESBURGHEN 39401-724 led: 04/19/1966 Sex: 1/5 of 72 Adm. 10/25/2017, D/C 10/25/2017

2. Extensive left facial fractures including the left orbital floor fracture

Effective Dose 4.4 mSv

This CT examination was performed using one or more of the following dose reduction techniques: Automated exposure control, adjustment of the mA and or kv according to patient size, use of iterative reconstruction techniques.

Impression:

This report was signed by Thomas Cole MD on 10/25/2017 7:12 AM.

Specimen Informat			
Type Imaging	Source	Collected By 10/25/17 0649	

**END OF REPORT** 

Case: 46CI1:18-cv-00133-AM Document #: 1 Filed: 04/19/2018 Page 66 of 72



10/26/2017

**Guarantor:** 

Service Location: Marion General Hospital

Insurance Coverage on File: ACI LIABILITY - ACI LIABILITY

Current Account Balance: 1,992.00

This is not a bill. This is an itemization of hospital services for:

Patient:	Hospital Account:	Admission Date:	Discharge Date:
Bell,Scott E	40000031201	10/24/17	10/25/17

#### Charges

steple in	Reviolee	(Procedure)	Description	ely	Amount
1000年1100年1	这些对他以证	Ololo Exten		() [6]	1990年
10/25/17	0636		KETOROLAC 30 MG/ML SOLN	4	78.00
10/25/17	0351	35110007	HB CT MAX-FACIAL W/O CO	1 1	1,751.00
10/25/17	0300	30016393	HB PRO TIME	1 1	20.00
10/25/17	0300 -	30016394	HB PTT-PARTIAL THROMB T	1 3	25.00
10/25/17	0300	30016000	HB PHLEBOTOMY FEE	1 1	14.00
10/25/17	0300	30016004	HB BASIC METABOLIC PROFILE	1	74.00
10/25/17	0300	30016002	HB CBC W/AUTO DIFF	1	30.00
Total char	ges:				1,992.00

Total payments and adjustments:

For questions regarding this itemization, please contact Patient Financial Services Customer Service at (601)288-2032.

Forrest General Hospital

Case: 46Cl1:18-cv-00133-AM

Document #: 1

Filed: 04/19/2018

Page 67 of 72

Results Ethanol (Order 102667757)

#### Collection Information

Specimen ID: 17M-300C0065

Collected: 10/25/2017 1:09 AM

Received: 10/27/2017 2:53 PM

ROWELL, BRANDON

Blood

Resulting Agency: MGH CC LAB

1560 Sumrall Rd

COLUMBIA MS 39429

#### Comments

Run with blood drawn 10/25/17

#### **基** Ethanol

Order: 102667757

Status: Final result Visible to patient: No (Not Released) Next appt: None

Ref Range & Units

10/25/17 0109

Ethanol Lvl

<=20 mg/dL

< 20

Ethanol Screen, Serum None Detected

None Detected

MGHCC

Resulting Agency Specimen Collected:

Last Resulted: 10/27/17

Order Details Lab and Collection Details Routing

10/25/17 01:09

15:06

Result History

#### Other Results from 10/24/2017

## **E** CBC auto differential

Order: 102667745

Status: Final result Visible to patient: No (Not Released) Next appt: None

	3,333	Ref Range & Units	10/25/17 0109	att.
WBC		4.8 - 10.8 bil/L	14.3 🙈	
RBC		4.50 - 6.00 tril/L	5.56	
Hemo	globin	14.0 - 16.5 g/dL	16.8 🙈	
Hema	tocrit	42.0 - 52.0 %	48.8	
MCV		81 - 97 fL	88	
MCH		27 - 32 pg	30	
MCHO	-	32 - 36 g/dL	34	
RDW		11.5 - 14.5 %	14.4	
Platel	et Count-	150 - 400 bil/L	232	
Auton	nated			
MPV		7.4 - 10.4 fL	8.2	
Granu	locyte Relative	42.2 - 75.2 %	80.8 🙈	
Lympl	nocytes Relative	20.5 - 51.1 %	10.0	
Mono	cytes Relative	1.7 - 9.3 %	8.6	
Eosino	phils Relative	.0-<5.0 %	0.4	
Basop	hils Relative	.0-<5.0 %	0.2	
👵 🤊 🏗 Granu	locytes_kbsolute	1.4 - 6.5 K/QR.	11.5	
Lymph	ocyte Absolute	1.2 - 3.4 K/uL	1.4	
Mono	cyte Absolute	0.11 - 0.59 K/uL	1.20 🗥	

Case 2:18-cv-00102-MTP Document 1-2 Filed 06/08/18 Page 69 of 83

Case: 46CI1:18-cv-00133-AM Document #: 1 Filed: 04/19/2018 Page 68 of 72

Results

Drug screen, basic, serum (Order 102667758)

#### Collection Information

Specimen ID: 17R-300R0044

Collected: 10/25/2017 1:09 AM

ROWELL, BRANDON

Received: 10/31/2017 2:06 AM

Blood

Resulting Agency: FGH QUEST

19225 Newbrook Drive Chantilly VA 20153-0841

Order: 102667758

#### Comments

Run with blood drawn 10/25/17

#### Drug screen, basic, serum

Status; Final result Visible to patient: No (Not Released) Next appt; None

10/25/17 0109

Carboxy THC

negative

GC/MS Conf.

**Amphetamines** 

negative

Cocaine

negative

Metabolite

**Opiates** 

negative

Phencyclidine

negative

Comments:

The submitted serum specimen was tested at the listed immunoassay screen cutoffs (ng/mL).

Initial Test

Drug Class

Level

Marijuana

30

Amphetamines

100

Cocaine metabolite

100

10

PLEASE READ THIS IMPORTANT MESSAGE:

Opiates

100

PCP (Phencyclidine)

THIS DRUG SCREEN IS FOR MEDICAL USE ONLY. THE RESULTS ARE PRESUMPTIVE; BASED ONLY ON SCREENING METHODS AND THEY HAVE NOT BEEN CONFIRMED BY A SECOND INDEPENDENT METHOD. THESE RESULTS SHOULD BE USED ONLY BY PHYSICIANS TO RENDER DIAGNOSIS OR TREATMENT, OR TO MONITOR PROGRESS OF MEDICAL CONDITIONS.

Resulting Agency

**QST** 

Page 69 of 72 \_\_ Filed: 04/19/2018 Narrative

Performing Organization Information:

Site ID: AMD

Name: QUEST DIAGNOSTICS INCORPORATED

Address: NICHOLS INSTITUTE, 14225 NEWBROOK DR CHANTILLY, VA 20151

Director: Patrick W Mason, M.D., Ph.D.

Specimen Collected:

Last Resulted: 11/05/17

Order Details Lab and Collection Details Routing

10/25/17 01:09

07:53

Result History 1 

Order: 102667745

#### Other Results from 10/24/2017

ES CBC auto diffi	erential
Status: Final result	Visible to patient: No (Not Released) Next appt: None

	Ref Range & Units	10/25/17 0109
WBC	4.8 - 10.8 bil/L	14.3 🙈
RBC	4.50 - 6.00 tril/L	15.56
Hemoglobin	14.0 - 16.5 g/dL	16.8 🙈
Hematocrit	42.0 - 52.0 %	48.8
MCV	81 - 97 fL	88
MCH	27 - 32 pg	30
MCHC	32 - 36 g/dL	34
RDW	11.5 - 14.5 %	14.4
Platelet Count- Automated	150 - 400 bil/L	232
MPV	7.4 - 10.4 fL	8.2
Granulocyte Relative	42.2 - 75.2 %	80,8 🙈
Lymphocytes Relative	20.5 - 51.1 %	10.0 😽
Monocytes Relative	1.7 - 9.3 %	8.6
Eosinophils Relative	.0-<5.0 %	0.4
Basophils Relative	.0-<5.0 %	0.2
Granulocytes Absolute	1.4 - 6.5 K/UL	11.5 A
Lymphocyte Absolute	1.2 - 3.4 K/uL	1.4
Monocyte Absolute	0.11 - 0.59 K/uL	1.20 🙈
Eosinophils Absolute	0.00 - 0.70 K/UL	0.10
Basophils Absolute	0.00 - 0.20 K/UL	0.00
ANC	K/uL	11,500
Nucleated RBCS	/100	0
Resulting Agency		MGHCC
Specimen Collected: 10/25/17 01:09	Last Resulted: 10/25/17 02:23	Order Details Lab and Collection Details Routing Result History

Basic metabolic panel

Order: 102667746

Status: Final result Visible to patient: No (Not Released) Next appt: None

Ref Range & Units

10/25/17 0109

Sodium

135 - 145 mmol/L

140

Gasa:s/IAC 1:18-cv-(	001 <u>33-AM</u> Documer	nt #: 1 Filed: 04/19/2018	Page 70 of 72
Chloride	98 - 107 mmol/L	102	ж "
CO2	21 - 32 mmol/L	22	
BUN	7 - 18 mg/dL	18	924
Creatinine	0.60 - 1.30 mg/dL	0.73	
Glucose	70 - 110 mg/dL	144 🙉	
Calcium	8.5 - 10.1 mg/dL	9.1	
Anion Gap	3 - 15 mmol/L	16 🙈	20
Osmolality Calc	275 - 295 mOsmol/kg	284	
<b>BUN/Creatinine Ratio</b>	8.0 - 23.0 mg/dL	24.7	
Non-AF American GFR	>=60 mL/min	>60	
AF American GFR	>=60 mL/min	>60	
Resulting Agency		MGHCC	# B
Narrative		Morrec	
	not calculated for a	malina da la	
or	The enterthick tot I	ndividuals under the age	of 18 years old
over the age of	90.		
Specimen Collected: 10/25/17 01:09	Last Resulted: 10/25/17 02:12	Order Details Lab and Coll	ection Details Routing Result History
₽T/PTT			
	le to patient: No (Not Rele	need Need and A	Order: 102667747
المن المعاون المقطر المن المناون المن المناون المن المناون الم	Ref Range & Units		Minimate Control And Control Section
Prothrombin Time	11.0 - 15.0 seconds	10/25/17 0109 11.5	
INR	1.0 - 1.3	1.0	3
aPTT	<=40.0 seconds	26.3	
Resulting Agency	TOTA BOCOTICIS	MGHCC	
Specimen Collected:	Last Day II . I do may		
10/25/17 01:09	Last Resulted: 10/25/17 02:17	Order Details Lab and Colle	ction Details Routing Result History
& Ethanol			
Status: Final result Visible	e to patient: No (Not Relea		Order: 102667757
Ethanoi Lvi	Ref Range & Units	10/25/17 0109	ころうちょう かんしん かいかい かんかん かんなんかん
Ethanol Screen, Serum	<=20 mg/dL	<20	~
Resulting Agency	None Detected	None Detected MGHCC	
Specimen Collected: 10/25/17 01:09	Last Resulted: 10/27/17	Order Details Lab and Collec	tion Details Routing
	15:06		Result History

Case 2:18-cv-00102-MTP Document 1-2 Filed 06/08/18 Page 72 of 83

Page 71 of 72 Case: 46CI1:18-cv-00133-AM Document #: 1 Filed: 04/19/2018

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Routing History

Message Priority Sent On From Туре Τo 叠 10/25/2017 Background P Mgh Results 2:12 AM User Lab Ed

Default

Results

10/25/2017 Fgh, Incoming P Mgh Results

12:51 AM Imaging Asap Orders/Results Results To Pool

Radiant/Cardiant

**Encounter** 

View Encounter

**Result Information** 

Status: Final Provider Status: Open

result (Collected: 10/25/2017 01:09)

**External Result Report** 

External Result Report

Lab Information

**FGH QUEST** 19225 Newbrook Drive Chantilly, Virginia 20153-0841

Additional Information

Specimen ID Bill Type Client ID 17R-300R0044 Client 9485

Specimen Date Specimen Time Specimen Specimen

Taken Taken Received Date Received Time Result Time Result Date Oct 25, 2017 1:09 AM Oct 31, 2017 7:53 AM 2:06 AM Nov 5, 2017

Other Results from 10/24/2017

CBC auto differential Final result 10/25/2017 Basic metabolic panel Final result 10/25/2017 PT/PTT Final result 10/25/2017

**Ethanol** Final result 10/25/2017

Results

Drug screen, basic, serum (Order 102667758)

Additional

Details Routing

11/5/2017 7:00 AM - Fgh, Incoming Lab Results From Quest

Case: 46CI1:18-cy-00133-AM Component Results

Document #: 1

Filed: 04/19/2018 Page 72 of 72

Component

Carboxy THC GC/MS Conf.

negative

**Amphetamines** 

negative

Cocaine Metabolite

negative

**Opiates** 

negative

Phencyclidine

negative

Comment:

The submitted serum specimen was tested at the listed immunoassay screen cutoffs (ng/mL).

	Initial Test
Drug Class	Level
Marijuana	30
Amphetamines	100
Cocaine metabolite	100
Opiates	100
PCP (Phencyclidine)	10

PLEASE READ THIS IMPORTANT MESSAGE:

THIS DRUG SCREEN IS FOR MEDICAL USE ONLY. THE RESULTS ARE PRESUMPTIVE; BASED ONLY ON SCREENING METHODS AND THEY HAVE NOT BEEN CONFIRMED BY A SECOND INDEPENDENT METHOD. THESE RESULTS SHOULD BE USED ONLY BY PHYSICIANS TO RENDER DIAGNOSIS OR TREATMENT, OR TO MONITOR PROGRESS OF MEDICAL CONDITIONS.

#### Narrative

Performing Organization Information:

Site ID: AMD

Name: QUEST DIAGNOSTICS INCORPORATED

Address: NICHOLS INSTITUTE, 14225 NEWBROOK DR CHANTILLY, VA 20151

Director: Patrick W Mason, M.D., Ph.D.

#### Patient Information

Patient Name Sex DOB SSN Bell, Scott E Male 9/3/1966 587-45-5291

Case: //6CI1:18_c	V-00133-AM Document	# 1-1 Filed: 0//19/2018	Page 1 of 2
COVER SHEET	Court Identification Do	cket# Case Year	Docket Number
Civil Case Filing Form		K DOUTS	11312 AM
_			
(To be completed by Attorney)		ourt ID I, CI, CO}	
Prior to Filing of Pleading	District (C	1, u, u)	Local Docket iD
	104191	100	11122
Mississippi Supreme Court	Form AOC/01 Month Date	Year \(\)(	VISS
Administrative Office of Courts	(Rev 2016) This area to be complete	ed by clerk Case	Number if filed prior to 1/1/94
In the CIRCUIT	Court of MARION	County —	Judicial District
Origin of Suit (Place an "X" In one box   X Initial Filing Reins	only) stated Foreign Judgment Enro	alled Transfer from Other cou	irt Other
	ened Joining Suit/Action	Appeal	
		Land.	
Plaintiff - Party(les) Initially Bringing S		litional Plaintiffs on Separate Form	_
Individual Bell	Scott		_ <u>E</u>
Last Name	First Name	Maiden Name, if applicabl	e M.I. Jr/Sr/III/IV
Check ( x ) if Individual Plaintiff Estate of	Is acting in capacity as Executor(trix) or Adr	ministrator(trix) of an Estate, and enter style:	
	is pering in connector as Pusinges Owner/One	rator (d/b/a) or State Agency, and enter entity	4
D/B/A or Agency	s actifig in capacity as business Owner/Ope	rator (u) by a j or state Agency, and enter entity	
1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			-
Business	en eller en	anne if Committee Indicate the state who	an language to d
		agency - If Corporation, Indicate the state whe	ite incorporated
D/B/A	filing suit in the name of an entity other th	an the above, and enter below.	
And the same of th			
Address of Plaintiff 1202 Pine Court.			
Attorney (Name & Address) Joseph L.		Mississippi 39429	MS Bar No. 100903
Check ( x ) if Individual Filing Init	ial Pleading is NOT an attorney		
Signature of Individual Filing:			
Defendant Name of Defendant Fate	Additional Defendants on Comments	Fe	
Defendant - Name of Defendant - Ente	r Additional Defendants on Separate	FOIM	
Individual City of Columbia	First Name	Malden Name, if applicable	e Man A/Sr/III/IV
Last Name Check / v ) if Individual Defends		dministrator(trix) of ar tistate, and enter style	
Estate of		The state of the s	11 11
Check (x) if Individual Defenda	nt is acting in capacity as Business Owner/C	perator (d/b/a) or State Agency, and enter en	tity:2040
D/B/A or Agency		AFK	3, 5018 (17)
Business	-		
Fotor legal n	ame of husiness composition, partnership	agency - if Corporation will ale the well-will	ALHOHIAGI ERK
Check ( x ) if Business Defendan	t watting in the name of an entity other tha	an the above, and enter below:	D.C.
D/B/A	(		
Attorney (Name & Address) - If Known			MS Bar No.
	7		100 241 (10)
Check ( x ) If child support is contem	plated as an issue in this suit.*	Alcohol/Drug Commitment (wheren)	Real Property
	f Support Information Sheet with this Cover Sheet		Adverse Possession
Nature of Suit (Place an "X" in one box	Business/Commercial	Children/Minors - Non-Domestic	Ejectment
Child Custody/Visitation	Accounting (Business)	Adoption - Contested Adoption - Uncontested	Eminent Domain
Child Support	Business Dissolution	Consent to Abortion	Judicial Foreclosure
Contempt	Debt Collection	MInor Removal of Minority	Lien Assertion
Divorce:Fault	Employment	Other	Partition
Dîvorce: Irreconcliable Diff.	Foreign Judgment	Civil Rights	Tax Sale: Confirm/Cancel
Domestic Abuse	Garnishment	Elections	Title Boundary or Easement
Emancipation	Replevin	Expungement	Other
Modification	Other	Habeas Corpus	Torts
Paternity  Respects Division	Probate    Accounting (Probate)	Post Conviction Relief/Prisoner Other 42 U.SC Sec 1983	Bad Falth
Property Division Separate Maintenance	Birth Certificate Correction	Contract	Fraud
Term. of Parental Rights-Chancery	Mental Health Commitment	Breach of Contract	Intentional Tort
UIFSA (eff 7/1/97; formerly URESA)	Conservatorship	Installment Contract	Loss of Consortium
Other	Guardianship	Insurance	Maipractice - Legal Maipractice - Medical
Appeals	Heirship	Specific Performance	Mass Tort
Administrative Agency	Intestate Estate	Other	Negligence - General
County Court	Minor's Settlement	Statutes/Rules	Negligence - Motor Vehicle
Hardship Petition (Driver License)	Muniment of Title	Bond Validation	Premises Liability
Justice Court	Name Change	Civil Forfeiture	Product Liability
MS Dept Employment Security Municipal Court	Testate Estate Will Contest	Declaratory Judgment Injunction or Restraining Order	Subrogation
Other	Alcohol/Drug Commitment (molunary)	Other	Wrongful Death Other
			and the state of t

Case: 46CI	T:18-CA-001	33-AM	Document #: 1-1	L Filed: 04/19/2018	Page 2 of 2	
IN THE CIRCUIT			OURT OF MARION	COUNTY, M	COUNTY, MISSISSIPPI	
			JUDICIAL DISTRICT,	CITY OF	<del></del>	
Docket No	Chronolog	ical No.		Docket No. If Filed Prior to 1/1/94 age 1 of Defendants I	-	
IN ADD	ITION TO DE	FENDAN	T SHOWN ON CIVIL	CASE FILING FORM COV	ER SHEET	
Defendant #2:						
Individual: <u>Columbia P</u>	olice Departme	nt	First Name	Maiden Name, if Applicable	) Middle Init. Jr/Sr/III/IV	
Estate of			2 =		tate, and enter style:  ncy, and enter that name below:	
D/B/A		-				
Business	legal name of bush	nesa, comorati	on, partnership, agency - If Con	octation, indicate state where incorpora	ted	
Check ( ) if Business</td <td>Defendant is t</td> <td>eing sued</td> <td></td> <td>other than the name above, a</td> <td></td>	Defendant is t	eing sued		other than the name above, a		
•				Pro Hac Vice (✓	) Not an Attorney(✔)	
Defendant #3:						
Check (🗸) If Individua	al Defendant Is	acting in c	apacity as Executor(trix)	Malden Name, if Applicable or Administrator(trix) of an Es		
Check (🗸) If Individua	l Defendant is a	acting in cap	pacity as Business Owner	r/Operator (D/B/A) or State Age	oncy, and enter that name below:	
Business			lan andrewkin agency if Con	poretion, indicate state where incorpora	aled	
Check (/) if Business	Defendant is b	eing sued		other than the name above, a		
				Pro Hac Vice (✓	) Not an Attorney(✓)	
Defendant #4:						
		Ada	m First Name		)	
		acting in c	apacity as Executor(trix)	or Administrator(trix) of an Es	Middle Init. Jr/Sr/III/IV	
Check (🗸) if Individua				r/Operator (D/B/A) or State/A96	ancy, and enter that hard below:	
Business	r legal name of busi	ness, corporat	ion, partnership, agency - If Cor	JANETTE NO poration, indicate state where incorpora	LAN, CIRCUIT CLERK	
	Defendant is i	eing sued	32.	other than the above, and en		
ATTORNEY FOR THIS DEFE			lame:	Pro Hac Vice (	/) Not an Attorney(✓)	

#### IN THE CIRCUIT COURT OF MARION COUNTY, MISSISSIPPI

SCOTT E. BELL

**PLAINTIFF** 

VS.

CAUSE NO. 18-cv-133AM

CITY OF COLUMBIA; COLUMBIA POLICE DEPARTMENT; CHIEF MIKE COOPER; OFFICER ADAM KELLY AND UNKNOWN DEFENDANTS ABC and XYZ

DEFENDANTS

#### **SUMMONS**

THE STATE OF MISSISSIPPI

TO: Officer Adam Kelly - Individually and in his Official Capacity

#### **NOTICE TO DEFENDANT(S)**

THE COMPLAINT WHICH IS ATTACHED TO THIS SUMMONS IS IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS.

You are required to mail or hand-deliver a copy of a written response to the Complaint to

Joseph L. Turney, MB # 100903 JOSEPH L. TURNEY, PLLC 716 Main Street Columbia, MS 39429 (601) 731-2098

the attorney for the Plaintiff. Your response must be mailed or delivered within thirty (30) days from the date of delivery of this summons and Complaint or a judgment by default will be entered against you for the money or other things demanded in the Complaint.

You must also file the original of your response with the Clerk of this Court within a

reasonable time afterward.

Issued under my hand and seal of said Court, this

2018.

(SEAL)

PRESENTED BY: Joseph L. Turney, MB # 100903 JOSEPH L. TURNEY, PLLC 716 Main Street Columbia, MS 39429 (601) 731-2098

Marion County.

This is a True Copy

NETTE NOLAN CIRCI

AN CIRCUIT CLERIK

#### PROOF OF SERVICE -- SUMMONS

Off	icer Adam Kelly - Individually and in his Official Capacity
I, the undersigned process below (process server mu to the mode of service use	s server, served the summons upon the person or entity named above in the manner set forth st check proper space and provide all additional information that is requested and pertinent ed):
Personal Service. 1 pe	ersonally delivered copies to
Residence Service. Al County, N place of abode of said per	fler exercising reasonable diligence, I was unable to deliver copies to said person within dississippi. I served the summons on the day of, 2018, at the usual son by leaving a true copy of the summons with, who is the
of the person served, above	There insert wife, son, daughter or other person as the case may be), a member of the family or the age of sixteen years and willing to receive the summons, and thereafter on the, I mailed (by first class mail, postage prepaid) copies to the person served at his or her the copies were left.
At the time of service, 1 w	ras at least 18 years of age and not a party to this action.
Fee for Service \$ \$ 44	0.00
Process Server must list b	elow: (Please print or type)
Name Address Felephone No.: Social Security No.:	3422 W 74 MAY 16 Halling burg 195 39401 (401) 7410-1514
State of Mississippi County of	
James Lewis	e me, the undersigned authority in and for the state and county aforesaid, the within named who, being first by me duly sworn, states on oath that the matters and facts set forth in the ee-Summons" are true and correct as therein stated.
	U. Process Server Signature
worn to and subscribed b	MA
My Commission Expires:	Lelen Taxiana Manata Notary Public
,	O: 10 = 47535

Case: 46Cl1:18-cv-00133-AM Document #: 5 Filed: 05/23/2018 Page 1 of 2

#### IN THE CIRCUIT COURT OF MARION COUNTY, MISSISSIPPI

SCOTT E. BELL

**PLAINTIFF** 

VS.

**CAUSE NO. 18-cv-133AM** 

CITY OF COLUMBIA; COLUMBIA POLICE DEPARTMENT; CHIEF MIKE COOPER; OFFICER ADAM KELLY AND **UNKNOWN DEFENDANTS ABC and XYZ** 

**DEFENDANTS** 

#### **SUMMONS**

THE STATE OF MISSISSIPPI

City of Columbia - Through Its Registered Agent, City Clerk Donna McKenzie TO: 201 Second Street, Columbia, Mississippi 39429

#### NOTICE TO DEFENDANT(S)

THE COMPLAINT WHICH IS ATTACHED TO THIS SUMMONS IS IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS.

You are required to mail or hand-deliver a copy of a written response to the Complaint to

Joseph L. Turney, MB # 100903 JOSEPH L. TURNEY, PLLC 716 Main Street Columbia, MS 39429 (601) 731-2098

the attorney for the Plaintiff. Your response must be mailed or delivered within thirty (30) days from the date of delivery of this summons and Complaint or a judgment by default will be entered against you for the money or other things demanded in the Complaint.

You must also file the original of your response with the Clerk of this Court within a reasonable time afterward.

Issued under my hand and seal of said Court, this

2018.

(SEAL)

PRESENTED BY: Joseph L. Turney, MB # 100903 JOSEPH L. TURNEY, PLLC 716 Main Street Columbia, MS 39429 (601) 731-2098

This is a True Co

#### **PROOF OF SERVICE -- SUMMONS**

City of C	Columbia - Through Its Registered Agent, City Clerk Donna McKenzie
	ocess server, served the summons upon the person or entity named above in the manner set forth r must check proper space and provide all additional information that is requested and pertinent e used):
Personal Service.	I personally delivered copies to Downa Melen 715 on the 18th day of 018, where I found said person in Marion County of the State of Mississippi.
Residence Service Count place of abode of said of the person served, a day of, 2	After exercising reasonable diligence, I was unable to deliver copies to said person within ty, Mississippi. I served the summons on the day of, 2018, at the usual I person by leaving a true copy of the summons with, who is the, (here insert wife, son, daughter or other person as the case may be), a member of the family above the age of sixteen years and willing to receive the summons, and thereafter on the (2018, I mailed (by first class mail, postage prepaid) copies to the person served at his or her where the copies were left.
At the time of service,	, I was at least 18 years of age and not a party to this action.
Fee for Service \$	
Process Server must li	ist below: (Please print or type)
Name Address	Carrier Pairies 601-731-8297
Telephone No.: Social Security No.:	601-731-8297
State of Mississippi County of	
sho Puete	efore me, the undersigned authority in and for the state and county aforesaid, the within named, who, being first by me duly sworn, states on oath that the matters and facts set forth in the ervice-Summons" are true and correct as therein stated.
	Process Server Signature
Sworn to and subscribe	ed before me, this the 20 day of May, 2018.
My Commission Expir	es: 1-1-2020 Can Burns Varcey Clare
(SEAL)	Notary Public (assigned) (assigned) (assigned) (assigned)

#### IN THE CIRCUIT COURT OF MARION COUNTY, MISSISSIPPI

SCOTT E. BELL

**PLAINTIFF** 

VS.

CAUSE NO. 18-cv-133AM

CITY OF COLUMBIA; COLUMBIA
POLICE DEPARTMENT; CHIEF MIKE
COOPER; OFFICER ADAM KELLY AND
UNKNOWN DEFENDANTS ABC and XYZ

DEFENDANTS

#### SUMMONS

THE STATE OF MISSISSIPPI

TO: Columbia Police Department - Through Its Registered Agent, Chief Michael Kelly 205 Second Street, Columbia, Mississippi 39429

#### NOTICE TO DEFENDANT(S)

THE COMPLAINT WHICH IS ATTACHED TO THIS SUMMONS IS IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS.

You are required to mail or hand-deliver a copy of a written response to the Complaint to

Joseph L. Turney, MB # 100903 JOSEPH L. TURNEY, PLLC 716 Main Street Columbia, MS 39429 (601) 731-2098

the attorney for the Plaintiff. Your response must be mailed or delivered within thirty (30) days from the date of delivery of this summons and Complaint or a judgment by default will be entered against you for the money or other things demanded in the Complaint.

You must also file the original of your response with the Clerk of this Court within a reasonable time afterward.

Issued under my hand and seal of said Court, this

day of April , A. D

2018.

(SEAL)

PRESENTED BY: Joseph L. Turney, MB # 100903 JOSEPH L. TURNEY, PLLC 716 Main Street Columbia, MS 39429 (601) 731-2098

This is a True Copy

JANETTE NOLAN

CIRCUIT CLERK

#### PROOF OF SERVICE -- SUMMONS

Columbia l	Police Department - Through Its Registered Agent, Chief Michael Kelly
	cess server, served the summons upon the person or entity named above in the manner set forth must check proper space and provide all additional information that is requested and pertinent used):
Personal Service.	personally delivered copies to Michael Wall on the 18th day of 018, where I found said person in Mario County of the State of Mississippi.
Residence Service.	After exercising reasonable diligence, I was unable to deliver copies to said person within y, Mississippi. I served the summons on the day of, 2018, at the usual
place of abode of said	person by leaving a true copy of the summons with, who is the, (here insert wife, son, daughter or other person as the case may be), a member of the family
of the person served, a day of, 20	bove the age of sixteen years and willing to receive the summons, and thereafter on the 018, I mailed (by first class mail, postage prepaid) copies to the person served at his or her the copies were left.
At the time of service,	I was at least 18 years of age and not a party to this action.
Fee for Service \$	
Process Server must li	st below: (Please print or type)
Name Address	601-731-8297
Felephone No.: Social Security No.:	601-731-8297
State of Mississippi County of MORIO	
Personally appeared be	efore me, the undersigned authority in and for the state and county aforesaid, the within named, who, being first by me duly sworn, states on oath that the matters and facts set forth in the rvice-Summons" are true and correct as therein stated.
Sworn to and subscribe	
My Commission Expir	es: Notary Public  Notary Public
SEAL)	Notary Public  About March Carlot

#### IN THE CIRCUIT COURT OF MARION COUNTY, MISSISSIPPI

SCOTT E. BELL

**PLAINTIFF** 

VS.

CAUSE NO. 18-cv-133AM

CITY OF COLUMBIA; COLUMBIA POLICE DEPARTMENT; CHIEF MIKE COOPER; OFFICER ADAM KELLY AND UNKNOWN DEFENDANTS ABC and XYZ

DEFENDANTS

#### **SUMMONS**

THE STATE OF MISSISSIPPI

TO: Chief Mike Cooper - Individually and in his Official Capacity

#### NOTICE TO DEFENDANT(S)

THE COMPLAINT WHICH IS ATTACHED TO THIS SUMMONS IS IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS.

You are required to mail or hand-deliver a copy of a written response to the Complaint to

Joseph L. Turney, MB # 100903 JOSEPH L. TURNEY, PLLC 716 Main Street Columbia, MS 39429 (601) 731-2098

the attorney for the Plaintiff. Your response must be mailed or delivered within thirty (30) days from the date of delivery of this summons and Complaint or a judgment by default will be entered against you for the money or other things demanded in the Complaint.

You must also file the original of your response with the Clerk of this Court within a

reasonable time afterward.

Issued under my hand and seal of said Court, this

of  $\triangle (Y) \cap I$ ,

2018.

(SEAL)

PRESENTED BY: Joseph L. Turney, MB # 100903 JOSEPH L. TURNEY, PLLC 716 Main Street Columbia, MS 39429 (601) 731-2098

This is a True Copy

of Marion County

VETTE NOLAN CIRC

#### PROOF OF SERVICE -- SUMMONS

(	Chief Mike Cooper - Individually and in his Official Capacity
	sess server, served the summons upon the person or entity named above in the manner set forth must check proper space and provide all additional information that is requested and pertinent used):
Personal Service. 1	personally delivered copies to Mike Coper on the 22vd day of 18, where I found said person in Marion County of the State of Mississippi.
Residence Service.	After exercising reasonable diligence, I was unable to deliver copies to said person within
place of abode of said	, Mississippi. I served the summons on the day of, 2018, at the usual person by leaving a true copy of the summons with, who is the
of the person served, alday of, 20	, (here insert wife, son, daughter or other person as the case may be), a member of the family bove the age of sixteen years and willing to receive the summons, and thereafter on the 118, I mailed (by first class mail, postage prepaid) copies to the person served at his or her here the copies were left.
At the time of service,	I was at least 18 years of age and not a party to this action.
Fee for Service \$	
Process Server must lis	t below: (Please print or type)
Name	Lance Parche
Address	
Telephone No.: Social Security No.:	601-731-8287
State of Mississippi	
County of Marian	
hno Vonter	fore me, the undersigned authority in and for the state and county aforesaid, the within named, who, being first by me duly sworn, states on oath that the matters and facts set forth in the vice-Summons" are true and correct as therein stated.
ra . 4 vi ev	$R^{\prime\prime}$
Sworn to and subscribe	d before me, this the LINU day of 2018.
My Commission Expire	No. of the control of
(SEAL)	Notary Public  (abte Maller A